



International Cooperative Education Application Form College of innovation and Management Suan Sunandha Rajabhat University, Bangkok, Thailand

Approval of student works in cooperative education

Dear Dean of College of innovation and Management

Lam (Mr./Miss/Mrs.)	(For student's parents)		
		Sub-district	
		Country	
Passcode	Telephone	Student's relationship	
Certify to (M	r./Miss) (For student)		
Student Code	Majoı		
To cooperative edu	cation at		
For students	to work in cooperative educati	on this time, I agree to allow students to v	work in
cooperative education	on and agree to pay for damage	es. If the student damages the property of	the
organization where t	he student works in cooperativ	e education. Also, I am well-acknowledge	any risk of
COVID-19 Situation a	and allow students to continue	work in cooperative education.	
l wou	ld like to inform and certify		
		Best Regards	
		Signature(Studen	t's Parents)
		Full Name ()	
		Date	
		Signature(Student)	

Remark

1. To attach one of copy of ID Card.