

Visit Request Form

Your request will only be attended to upon receipt of this completed form.

IMPORTANT to note:

- 1. All sections **must** be completed in full.
- 2. The completed form should be submitted to cia@g.sut.ac.th Fax: +66 4422 4140 at least 15 days **prior** to the date of your proposed visit.
- 3. Requests submitted by agents (including travel agents) will not be accepted.

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| Tel: | Mobile: | Fax: |
| cussion: ble us to ensure that r | relevant faculties/offices are | represented at the meeting) |
| | | |
| | | |
| | on / Organisation: res of excellence (if ar | on / Organisation: es of excellence (if any), etc.) cussion: |



Person(s) You Would Like to Meet:

| Name | Designation |
|------|-------------|
| | |
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| | |

| Total | number | of | delegates: | |
|-------|--------|----|------------|--|
| | | | | |

Leader of Delegation / Visiting Group:

(Please provide CV or biography)

| Title (Prof./Dr./Mr./Ms.) | First Name | Last Name | Position | Email |
|------------------------------|------------|-----------|----------|-------|
| | | | | |

Information of Delegates / Visitors:

(Kindly include all members of delegation to facilitate seating arrangements)

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|------------------------------|------------|-----------|----------|-------|
| Title (Prof./Dr./Mr./Ms.) | First Name | Last Name | Position | Email |
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The delegation's contact person whilst in Thailand:

| Name | Designation | Mobile Number |
|------|-------------|---------------|
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For your delegation to receive maximum benefit from their visit, they should either have a working knowledge of English or be accompanied by an interpreter. Suranaree University of Technology is not able to provide interpretation services.

Thank you for completing the Visit Request Form.
Any questions, please email cia@g.sut.ac.th