

## POWER OF ATTORNEY

Suranaree University of Technology  
111 University Avenue,  
Suranaree Subdistrict,  
Muang District, Nakhon Ratchasima,  
THAILAND 30000

To Whom It May Concern,

By this document, Associate Professor Dr. Pornsiri Jongkol, the Acting Rector of Suranaree University of Technology as authorized by the Order of Suranaree University of Technology Council No. 26/B.E. 2568 (2025) dated 7 September 2025, hereby authorize [Name of authorized representative], [Position of authorized representative], as an authorized signatory in the Memorandum of Understanding between the [Name of MOU/Agreement]. This authorization includes undertaking any other necessary actions on my behalf to complete the agreement.

Actions undertaken by [Name of authorized representative], [Position of authorized representative], within the scope of this authority, shall remain in full force and effect as if personally undertaken by me in all respects.

In witness whereof, I hereunder subscribe my name in the presence of the witnesses.

Principal

Attorney-in-Fact

Signed: .....

Signed: .....

Associate Professor Dr. Pornsiri Jongkol

[Name of authorized representative]

Witness

Witness

Signed: .....

Signed: .....

[Name of witness]

[Name of witness]