

Faculty of Nursing

Prince of Songkla University

Visa Extension Request Form

Date				
Dear	Dean			
	l am l	Mr/Miss/Mrs		
Student ID: F		Progra	ım of Study	
Passport No.		l w	ould like to request for visa extension letter.	
My visa will expire on			and the expectation of graduation is	
(mont	:h)	(year)	··· ·	
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Student's Signature				
	_	(
Advisor's comment				
	I truly	certify that his/her expectati	on of graduation is (month)	
(year)				
Since	rely,			
Advis	or's Signatuı	re		
Advis	Advisor's Name ()			
For o	fficial Used (Only		
	เรียน		เพื่อโปรดพิจารณาลงนามในหนังสือขอต่อ	
วีซ่าของนักศึกษาดังกล่าวด้วย จะเป็นพระคุณยิ่ง				