

Job No.

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(Only for institution staff)

Cooperative Education Proposal Form Faculty..... Chiang Mai University

To Dean

.....(Name of Business)..... is interested in accepting cooperative education students and would like to propose the job details as follows:

Name of Business (in Thai) _____ (in English) _____	
Address No. _____	Road _____ Alley _____ Sub-district _____
District _____	City _____ Postal Code _____
Tel. _____	Fax _____ E-mail _____
Type of Business/Product _____	
Total Staff Number _____	Person(s) Total work hours _____ (Hour/Week)
Name of Business's Employer	
Name _____	Position _____
Should the university wish to coordinate with the business, please contact the	
<input type="radio"/> Manager/Division Leader	
<input type="radio"/> Contact the staff of the business as follows	
Name _____	Position _____ Department/Section _____
Field of Requirements _____	Student No. _____ Person(s)
Qualifications of the students and other requirements (Equipment and tools required to be carrier for the operation) _____ _____	
Job Position _____	
Job Description (May be a project, research, or full-time job corresponding to the field of study.) _____ _____	
Duration of work	
<input type="radio"/> Semester 1 (Aug - Dec, Year.....) <input type="radio"/> Semester 2 (Jan - Nov.) Year..... <input type="radio"/> Full Academic Year (Year.....)	
Student welfare during work period	
Salary _____ Baht/Day or Baht/Month	
Accommodation <input type="radio"/> Yes <input type="radio"/> No fees <input type="radio"/> Student responsible for fees of _____ Baht/month <input type="radio"/> No accommodation	
Transportation to and from the accommodation and the community.	
<input type="radio"/> Yes <input type="radio"/> No fees <input type="radio"/> Student responsible for fees of _____ Baht/month <input type="radio"/> No accommodation	
Other welfare (Please indicate e.g. food and uniform) _____	
Note: Please attach a map showing the location of the place of work for the convenience of self-reporting and for supervision by the professors. Thank you.	(Signature) _____ (Informant) (_____) Position _____ Date _____