



# Memorandum

School / Division of ..... Telephone.....

No. .... Date .....

Subject Request form for OMR paper  Midterm  First semester  
 Final  Second semester Academic year.....  
 Other (Please specify).....

Dear Head of the Division of Registrar

The School / Division of ..... has request for OMR paper in examinaton from the course below

No.	School/ Division	Course name	Number of students	Number of OMR papers	Instructor/ Co-ordinator

For your consideration

.....  
(.....)

School/Division of.....

Head of the Division of Registrar
(.....)
Mr.Ruangsak Kiengkamon
Date .....

For receiver
(.....)
.....
Date .....