Date...... Month..... Year.....

Subject Maternity Leave Application То ...... (Supervisor's name) I, (Mrs.).....position..... Department..... am applying for a maternity leave/additional maternity leave as mentioned below: 60 Days to Date...... Month...... Year...... 90 Days () 2. A total of 90 days from Date...... Month...... Year....... to Date...... Month...... Year...... 60 Days plus additional maternity leave () 3. A number of days for an additional maternity leave from Date...... Month...... Year...... to Date...... Month...... Year...... A total of maternity leave plus additional maternity leave......days. According to University of the Thai Chamber of Commerce Regulations on the university employees B.E. 2542 Article 28 "Female employees are entitled to a maximum of 90 days maternity leave with a proof of official medical reference. They are entitled for a maximum of 60 days leave with paid, etc." The address during maternity leave: No...... Soi/Mooban...... ......Sub-district ......District .....Province Tel..... I declare that the above statements are true and correct. ..... (.....) Ext....

Dean/Supervisor's Opinion	Head of Human Resource Management