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Letter of Permission

To Whom It May Concern,

I, _____ (full name), date of birth ____ / ____ / ____

(DD/MM/YYYY), of _____

_____ (current address)

Tel: +66 _____ Email: _____

authorize Ubon Ratchathani University (UBU), Thailand to check my academic achievement at

_____ (name of institution), _____ (country).

Yours sincerely,

Signature _____

Name _____

Date _____