 Division …………………….....................

 Tel. i + 70 - …………………..

**No.** 78.381. ..../.................

**Date** ………………………………..

**Subject** Request approval for project principles............................................................................................................

**Dear**

 According to the division of ............................................................................................. required to carry out ..........................................................................................................................................................with the objective of .................................................................................................................................................

 In this regard, requesting approval for the principle and the project in the annual budget plan…………………………………….. Therefore, the form MUKA-QD-16 has been attached to the project/activity. (Annual regular mission) (without budget) for further consideration.

 Please be informed accordingly for approval of the above mentioned, will be very appreciated.

Signature : .................................................. Signature : ..................................................

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

position................................................................. Head of...............................................

 Date .........../.............../............... Date .........../.............../...............

**(1) For policy and planning officers**

In line with the strategic issue No. .....................................

In line with the strategic issue ............................................

Organization name..................................code.......................

(Ms.Mananya Nukhao)

Head of Planning and Quality Development Division

Date……/…………./………..

🗖 Approve 🗖 disapproved

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

..........................................................................

Date……/…………./………..

ผู้ประสานงาน.....