



## Approving the Results of the Comprehensive Exam for Master Students

<b>Specialization Dep.</b>				<b>Date:</b>			
<b>Name of the Program:</b>							
<b>Comprehensive Exam Committee recommends:</b>							
<b>Members of the committee:</b>							
	<b>Name</b>			<b>Signature</b>			
1							
2							
3							
4							
5							
<b>To approve the results of the students who sat for the exam dated:</b>							
			<b>As follows:</b>				
	<b>Name of student</b>		<b>SID</b>	<b>Result in writing</b>		<b>Result: Pass/Fail</b>	
1							
2							
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10							

<b>Recommendation of Graduate studies' committee – Department level</b>					
<b>Decision No.</b>		<b>Date:</b>		<b>Disapprove</b> <input type="checkbox"/>	<b>Approve</b> <input type="checkbox"/>
<b>Signature of the Chair of the committee:</b>					
<b>Recommendation of Graduate studies' committee – Faculty level</b>					
<b>Decision No.</b>		<b>Date:</b>		<b>Disapprove</b> <input type="checkbox"/>	<b>Approve</b> <input type="checkbox"/>
<b>Signature of the Chair of the committee:</b>					
<b>Decision of Graduate Studies Council:</b>					
<b>Decision No.</b>		<b>Date:</b>		<b>Disapprove</b> <input type="checkbox"/>	<b>Approve</b> <input type="checkbox"/>
<b>Signature of the Chair of the Council:</b>					
<b>For the use of the Deanship of Scientific Research and Graduate Studies:</b>					
<b>The above information is correct</b> <input type="checkbox"/>					
<b>Any further notes:</b>					
<b>Dean's signature</b>		<b>Date:</b>			
<b>Documents to be attached with this form:</b>					
<b>1. Exam booklets.</b>					
<b>Dean of faculty /copy</b> <input type="checkbox"/>					
<b>Registrar General /copy</b> <input type="checkbox"/>					