

Kingdom of Saudi Arabia
Ministry of Education
King Faisal University
Deanship of Graduate Studies



المملكة العربية السعودية
وزارة التعليم
جامعة الملك فيصل
عمادة الدراسات العليا

Employer Approval Form

Employment Information

Employee's name

Employee's number

Employee's position

Place of work

Employee Acknowledgement:

We grant the abovementioned employee permission to pursue his/her graduate studies for Diploma/ MA/ PhD degree as a:

Full time student ☐

Part time student ☐

As of the academic year _____/ _____ H.

Name of official in charge: _____

Position of official in charge: _____

Signature: _____

Date: _____

Official Seal