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

## **Study Plan for Postgraduate Student Form**

Student Name:	
College:	
Specialization:	
Scientific Degre	ee:

Academic Number:	
Academic Department:	
Date of Admission:	

N	Course Name & Number	Credit Hours	Academic Semester	N	Course Name & Number	Credit Hours	Academic Semester	Comments

Academic Supervisor	: 	Student:	
Signature:		Signature:	
Date:			

Copy for the college vice dean of postgraduate study & scientific research

Copy for the head of the department

Copy for the academic supervisor

Copy for the student

Notice: The original copy should be given to the deanship of postgraduate studies.