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| --- | --- |
| School:      Department:     Master Program:      |  |
| **Recommendation of the Program’s Department of Graduate Studies Committee:** |
| The Graduate Studies Committee of the Department:        recommends the formation of the comprehensive exam committee for the Master program that will be convened at time:       Day:       Date:       as follows: |
|  | **Full Name** | **Academic Rank** | **Specialization** |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| Session No: Comments:  |
| Department Graduate Studies CommitteeChairperson’s signature: Date: / / |
| **Recommendation of the Program’s School Graduate Studies Committee:** |
| [ ] Approve [ ] Reject | Session No: |
| Comments:  |
|  |
| School’s Graduate Studies Committee Dean’s signature | Date: / /  |

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| **Dean of Graduate Studies Decision:** |
| [ ] Approve | [ ] Reject |
| Comments:  |
| Signature:  | Date: / /  |
|  |  |
|  |  |

Cc/School’s Graduate Studies Committee Chairperson.

\*Article No. (48/c) in the MSc regulations in GJU.