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| **Student Personal Information:** |
| -Name:       | -Identification No.:       | Mobile No:      |
| -School/Department/Program:       |
| -Current Semester:       |
| **Program’s Department Graduate Studies Committee Recommendation:** |
| The committee recommends granting the student: …………………………………., the Higher Diploma Degree in the specialization………………………………………………………………………Based on the approved result of: □ 1- Thesis Defense □ 2- Comprehensive ExamComments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Session No.: Signature of Committee’s Chairperson: Date: / /  |
| **Program’s School Graduate Studies Committee Recommendation:** |
| □ The committee recommends granting the above mentioned student the Higher Diploma Degree in the specialization: ……………………………………………………………………….Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Session No.: Signature of Committee’s Chairperson: Date: / / |
| **Council of Graduate Studies Recommendation:** |
| □ The Council recommends granting the above mentioned student the Higher Diploma Degree in the specialization: ………………………………………………………………………Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Session No.: Signature of the Dean: Date: / /  |
| Cc/Director of Admission and Registration Dept.\*Article No. (53/C) in the MSc regulations in GJU. |