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|  **Student Personal Information:** |
| Program:       | Program’s Department:       |
| School: :       | Semester:      | Academic Year:       |
| Student name : | Student No.: |
| Cumulative Average: |  |
| National ID: | Phone: |
| **Grant Type** |
| □Academic Excellence Grants | □Teaching Assistance Grant  | □ Scientific Research GrantProject name:Researcher: Funded by:  |
| **Have any other Grant:**□ Yes From \_\_\_\_\_\_\_\_\_\_\_\_\_ □ No |
| Applicant’s Signature:  | Date: / /  |
| **Program’s School Graduate Studies Committee Recommendation** |
| □ Approve | □ Reject |
| Comments: | Session No.:  |
| Signature of Committee’s Chairperson:  | Date: / /  |
| **For use of Department of Admission and Registration** |
| □ All the information mentioned above are correct and precise.Comments:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Signature:  | Date: / / |
| **For use of Department of finance** |
| □ Not an employee or holds a grant or any academic Scholarship from any another party.Comments:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature:  | Date: / /  |
| **Program’s School Graduate Studies Committee Recommendation:** |
| Comments: | Session No.:  |
| Signature of Committee’s Chairperson:  | Date: / /  |

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| **For use of Deanship of Graduate Studies:** |
| □ All the information mentioned above are correct and precise.Comments:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature:  | Date: / / |
| **Council of Graduate Studies Recommendation**: |
| □ Approve | □ Reject |
| Comments: | Session No.: |
| Signature of the Dean:  | Date: / /  |

Cc\ Director of Finance Dept.

 Deanship of Graduate Studies in order to take action.

Attach\ Teaching load is the type of grant is Teaching Assistantship Grant.