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| **Student Name:** |  |
| **Student ID:** | **Email:** |
| **Civil ID:** |  |
| **Mobile no.:** |  |
| **Thesis title:** | |
| **Academic Department:** |  |
| **Academic Semester:** |  |
| **Main supervisor:** |  |
| **Academic Degree:** |  |
| **Co-supervisor:** |  |
| **Academic Degree:** |  |
| **Supervisor’s remarks:**  ....................................................................................  .....................................................................................  .....................................................................................  .....................................................................................  **Main supervisor’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | ....................................................................................  .....................................................................................  .....................................................................................  .....................................................................................  **Co-supervisor’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Registration Department:**  ............................................................................................................................................................................  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **Finance Department:**  ............................................................................................................................................................................  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **Note: Students are required to register and pay fees at the beginning of each semester. If he/she does not register for a term of two semesters (in accordance with article 47 of the Student Affairs Regulations), his/her registration shall be canceled. A student will be dismissed from school if he/she fails to enroll in two semester. The student shall continue to register and pay the fees until – and shall be stopped at – the thesis is approved by the oral examination committee, the completion of required amendments and the approval of the head of the committee.** | |
| **To be completed by the student:**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Remarks by the Chairman of the Graduate Studies Executive Office:**  ............................................................................................................................................................................  ............................................................................................................................................................................  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **Date of submission for referral: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |