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| C:\Users\dell\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\3QVD6TBS\Kilaw Logo.jpg ***Thesis Registration Form (While Studying)***  Student name: ..................................................................................................................  Student ID:...........................................  Area / major: ...........................................  Email: .......................................................... Mobile no.: .....................................  Thesis title:.......................................................................................................................................  ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |
| ***Part (1): To be completed by the thesis registration department***  Academic semester: ……………………………………… Passed credits: ……………………….. (9 credits)Signature: ……………………………………………………… |
| ***Part (2) To be completed by the thesis supervisor:***  Main supervisor: ………………………………………………. Academic Degree: ………………………………………  Department: ……………………………………………………..  Signature: …………………………………………………………. Date: ………………………………………………………….. |
| **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.** |
| Student’s signature: .......................................... Date:.......................................................... |
| ***Part (3): Chairman of the Graduate Studies Executive Office:***  □ **Rejected** □ **Approved**  **Chairman’s signature: ................................ Date: …………......................** |