**REQUEST FOR MASTER’S THESIS REGISTRATION \***

### AC / 1 T



(This form should be submitted to the CGS within 3 weeks from the beginning of the semester that the student

currently registered in Thesis)

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| Student’s name: | | | | |  | | | | | | | | | | | Student’s No: | | | | | |  | | | | | | | | | |
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| Program: | | |  | | | | | | | | | | | | | Area: | | | |  | | | | | | | | | | | |
| E-mail: | |  | | | | | | | | | | | | | | Tel. No.: | | | | |  | | | | | | | | | | |
| G.P.A.:  **(2.67 at least)** | | | | | | | | | | | | | | | | No. of Semesters/Year: | | | | | | | | |  | | | | |  |
| Time Status: | | | Full time  Part time | | | | | | | | | | Cumulative credits earned: | | | | | | | | | Credits **(at least 12 credits)** | | | | | | | | |
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| **PART A -To be completed by student’s Supervisory Committee:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| |  |  | | --- | --- | | Main Supervisor's Name: | Univ. ID. No.: | | Academic Rank: | Department/College: |  | | Area of Specialization: | E-mail: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| No. of students being Supervised:  as main Supervisor  as Co-Supervisor  as Project Supervisor  No. of students for the Supervisor:  as for thesis  as for Dissertation  as for Project  No. of students for the Supervisor:  as for thesis  as for Dissertation  as for Project | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Please enclose a letter of justification for nominating a Co-Supervisor (if applicable)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Co-Supervisor's Name: | | | | | | |  | | | | | | | | | | | | Univ. ID. No.: | | | | | | | | | | | | |
| Academic Rank: | | | | | | | | | | | | | | | | | | Department/College: | | | | | | | | |  | | | | |
| |  |  | | --- | --- | | Area of Specialization: | E-mail: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| No. of students being Supervised:  as main Supervisor  as Co-Supervisor  as Project Supervisor | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature of Student's: | | | | | | | |  | | | | | | | | | | | | | | | | | Date: | | |  | | | |
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| Signature & seal of Supervisor's: | | | | | | | | | |  | | | | | | | | | | | | | | | Date: | | |  | | | |
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| Signature & seal of Co-Supervisor's: | | | | | | | | | | |  | | | | | | | | | | | | | | Date: | | |  | | | |
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| **PART B - Program Director** | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | |  | |
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| Approved | | | | | | | | | | | | Not Approved | | | | | | | | | | | | |  | | | |  | | |
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| Remarks: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Signature & seal of Program Director: | | | | | | | | | | | | |  | | | | | | | | | | | | Date: | | |  | | | |
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| **PART C - College of Graduate Studies:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Is the student exempted from taking the Comprehensive exam?** **Yes**  **No** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Remarks: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Approved  Not Approved | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Signature of Vice Dean for Academic Affairs: | | | | | | | | | | | | | | | | | | | | | | | | Date: | | | |  | | | |
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\*The student is only allowed to register after passing one semester, and **12** credits, with G.P.A. **2.67** or above.

\*Form **AC/2 T** entitled “**Thesis Research Proposal & Budget**” should be completed and submitted to CGS via the Program Director**, within 5 weeks from the beginning of the semester.**

\*Please note that the maximum budget allocated for thesis is KD **1000/-** only for all programs (except for Medicine & Molecular Biology it is KD **2000/-** only).

\*Form **AC/3** “**Change of Supervisory Committee & Request for Changing Study Option for Master’s**”

should be used whenever there is a change of the Supervisor or Co-Supervisor and /or change in study option.

\*In justifiable cases, only one Co-Supervisor can be added.

**Copies to be sent after CGS approval to:**

-Program Director.

-Supervisory Committee.

**Original in the student's CGS files. AC / 1T (Fall 2014/2015)**

**Notes**

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2. Form AC/2 entitled “Thesis Research Proposal & Budget” should be completed and submitted to the College of Graduate Studies together with this form or afterwards but before the end of the current semester.

3. Form AC/3 entitled “Change in Supervisory Committee” should be used whenever there is a change in the name of the supervisor or co-supervisor.

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minimum of 12 approved course credits with a GPA of not less than 2.67.

1. The student will only be allowed to register for thesis after completing at least one semester and passing a

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