



College - Region: الكلية - المنطقة:
Program: التخصص:
Student Name: اسم الطالب/ة:
Academic Number: رقم الطالب الجامعي:
National ID Number: رقم السجل المدني:
Badge Number: رقم البطاقة:
Mobile Number: رقم الجوال:
E-mail: البريد الإلكتروني:

The College Council in its meeting No. قرر مجلس الكلية في اجتماعه رقم:

that was held on: و المنعقد بتاريخ:
Corresponding: الموافق:

has decided to close the record of the above stated student
for discontinuing his/her study without undertaking any
official procedure since the start of:

1st semester 2nd semester الأول الثاني

of the Academic Year: 20... / 20... G (A) من السنة الدراسية: 14... / 14... هـ (H) الموافق:

The Council motion has been reviewed by the Vice President
of Educational Affairs and approved by the University
President on:

Corresponding: الموافق:

The College will inform the student with the decision
and forward this form to the Deanship of Admission
& Registration – Riyadh no later than 5 working days.
أيام عمل .

Dean's Name: اسم العميد:

Signature: التوقيع:

Date: التاريخ:
Corresponding: الموافق:

College Stamp: ختم الكلية:

Deanship of Admission and Registration: عمادة القبول والتسجيل:

Dean's Name: التصديق: Approval: اسم العميد:

Date of Approval and Termination of Record/Stipend: Corresponding: تاريخ التصديق وإنهاء المكافأة: الموافق:

- *Original copy for student's file.
- *Copy for concerned Registration official to process on student's record – SIS.
- *Copy for Administrative Affairs to terminate record and stop stipend.
- *Copy for student through e-mail to complete clearance form and receive file.
- *Copy for Registration file.