



Proposal Approval Form

Student/Applicant	
First Name:	Last Name:
Program:	School:

Level: PhD M.Sc. PhD by research Undergraduate

Proposal Title:

Date of the Submission:

Date of the Meeting:

• Supervisors:	Name	Signature
1-	_____	_____
2-	_____	_____
• Advisors:		
1-	_____	_____
2-	_____	_____
• Internal Referees:		
1-	_____	_____
2-	_____	_____
3-	_____	_____
4-	_____	_____
• External Referees:		
1-	_____	_____
2-	_____	_____
3-	_____	_____
4-	_____	_____

School Vice Dean for Research Affairs /
School Vice Dean for Educational Affairs

IC-TUMS Vice Dean for
Research Affairs