

Kingdom of Saudi Arabia Ministry of Education Shaqra University University Agency for Postgraduate Studies and Scientific Research Executive Management of Graduate Studies

Graduation Release Form

<u>First - Student data</u>

Student's name	University number	
Section	College	
Academic degree	Academic year	

I, the student whose details are listed above, would like to be released from the university

after graduating.

The signature the date.....

Second: Clearance from relevant parties

The side	Employee Name	Signature/Date
Section		
College		
Central Library		
Executive Management		
of Graduate Studies		

I, the undersigned student, acknowledge that I have received all the contents of the file from the Executive Administration of Graduate Studies at Shaqra University and I no longer have any belongings. I do not have any obligations or dues to the university, and this is my acknowledgement of that.

The name Date / / 14 AH

Seal Official