Prince Mohammad Bin Fahd University

Office of the Registrar

Office of the Registrar Use Only
Autodate/time:_____
SN# _____

Dual Degree Registration Form

Student Name				Academic Year	
Student ID				Semester	
1st Degree		2nd Degree		Major	

Previous Major Courses

CRN	Course Name	Sec	Course Title	Credit Hours	Lecture Time				
					Sun	Mon	Tue	Wed	Thu
			Total Credit Hours						

Student Name	Signature	Date

For Department Chair Use Only (2nd Degree)

☐ Approved ☐ Denied

Comment		
Name	Signature	Date

For College Dean Use Only (2nd Degree)

☐ Approved ☐ Denied

Comment		
Name	Signature	Date

For Registrar Use Only

Verified and Processed by		
Name	Signature	Date

Notes

This Dual Degree Registration Form will be filled by the Student Only.

Before you hand it over to the Registration Officer:

1. Secure approval from Department of Chair and Dean

2. Keep your copy for your reference