Academic Requests
(MPBA Program)

KING KHALID UNIVERSITY
كلية الصيدلة
College of Pharmacy

A. Student Information

Student name		KKU ID	
Level		Mobile #	
Academic year		Term	

B. Academic Request

Request type*	☐ Admissions deferral (تأجيل القبول)	D council, Dean
	☐ Postponement of study (تأجيل الدراسة)	D council, C council
	☐ Course withdrawal (انسحاب من مقرر)	D council, Dean
	☐ Academic term withdrawal (انسحاب من فصل دراسي)	D council, Dean
	☐ Granting attempt to satisfy GPA req.** (منح فرصة إضافية لرفع المعدل)	D council, C council
	☐ Transfer from another program (التحويل من برنامج آخر)	D council, C council
	☐ Re-enrollment (إعادة قيد)	D council, C council, KKU st. comm.

# of prior admission deferrals عدد مرات تأجيل القبول السابقة		# of prior re-enrollments عدد مرات إعادة القيد السابقة	
# of postponed academic terms عدد الفصول الدراسية المؤجلة السابقة		# of withdrawn academic terms عدد الفصول الدراسية التي تم الانسحاب منها	
# of completed credits عدد الساعات المعتمدة المجتازة		Current GPA المعدل التراكمي الحالي	

* Refer to the requirements in Rules and Regulations for Graduates Studies.
** The student must meet with their academic advisor before submitting the request for granting an attempt to satisfy the required minimum GPA.

C. Course Withdrawal Information (please leave this section empty if not applicable)

Course code and name	
Have you withdrawen from this course in the past?	☐ Yes ☐ No
Have many courses in general have you withdrawn from?	☐ One course ☐ Two courses ☐ Three courses

D. Excuse Information

Excuse type	☐ Medical reasons ☐ Other:
Entity that issued the excuse	
Excuse description	

Instructions:
- Complete this form and **attach supporting documents** in the same PDF file.
- Email the form along with suprting documents (in one PDF file) to the program coordinator.
- You will be notified of the decision by email.

For official use only:

Final decision by	☐ Dean ☐ Dept Council ☐ College Council ☐ Other:
Meeting #		Recom. #	
Decision	
Name		Signature	