Kingdom of Saudi Arabia Ministry of Higher Education Umm Al-Qura University College of Computer and Information systems Computer Engineering Department



المملكة العربية السعودية وزارة التعليم العالي جامعة أم القرى كلية الحاسب الآلي ونظم المعلومات قسم هندسة الحاسب الآلي

Academic Advisement Record

To b	oe filled by the	student:	Term: First ()	, Second ()	143_	_/143	201_	_/201		
Na	ame:	·	М.		Adviso	or Name	:				
	Last	First	М.								
Uı	niversity I. D.	:				Date	:				
	Email	:	Mobile No. :							_	
or.	Academic Adv	visors use:									
're-	registration P	roposed Courses:						redit	Soo	tion	
S/N	N Course	Course No. Course Name					Hrs.	Theory	Lab.		
					Total Cr	edit Hrs	S.				
I	certify that I h		e violation and agree t man to drop any cours					nsent t	o the depa	rtment	
tud	lent's Signatui	·e									
			A	Advisor's S	ignature	(Approv	val)				
ost	t-registration (Add or Drop):									
J	Course No.	Cours	se Name	Credit	Add/	_		Section		Advisor	
/N	Course Mo.			Hrs	Add	Drop	Theory	La	b. A	pproval	

I certify that I have no prerequisite violation and agree to the above schedule and I give the consent to the department chairman to drop any course if it is violated the prerequisite.

Student's	Signature
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