

## Umm Al-Qura University Faculty of Dentistry Vice Dean for Clinical

**Affairs** 

## وحدة تدريب أطباء امتياز الأسنان

## **Dental Internship Training Unit**

جامعـــة أم القـــرى كلية طب الأسنان وكالة الكلية للشؤون السريرية



## Research progress Form

Student Name: University ID. NO.				
Supervisor Name:		Signature	»:	
CO-Mentor:	Signature:			
Head of the Research	i	Signature	<b>:</b> :	
	Research topic ( deadline 1/10/2016)			
H	Name	Signature	Date	Status
Supervisor	Name	Signature	Date	☐ Approved ☐ Disapproved
Head of the Research				☐ Approved☐ Disapproved☐
Chair of the internship				□ Approved □ Disapproved
Comments:				
	Research Protocol (deadline 1/12/2016)			
H	Name	Signature	Date	Status
Supervisor	Traine	Signature	Bute	□ Approved
				□ Disapproved
Head of the Research				☐ Approved☐ Disapproved☐
Chair of the				□ Approved
internship				□ Disapproved
Comments:				
		Thesis (deadline 1/5/2016)		
Ī	Name	Signature	Date	Status
Supervisor				□ Approved
XX 1 C.1 D 1				□ Disapproved
Head of the Research				☐ Approved☐ Disapproved☐
Chair of the				□ Approved
internship				□ Disapproved
Comments:				
<u>_</u>		search Completion		
~ .	Name	Signature	Date	Status
Supervisor				□ Pass □ Failed
Head of the Research				□ Pass
				□ Failed
Vice Dean for				□ Pass
clinical affairs				□ Failed
Chair of the				□ Pass
internship				□ Failed