



Training Course Request Form By the Center – Procedures for holding training courses / Advanced Design and Manufacturing Center	QF 0001/35- 1.0
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:Number

:the date

Course Information

Requesting party		Application submission date	
The field		Course venue	
Target group		Expected number of participants	
Number of training hours		Course duration in days	
Course start date		Course end date	
Trainer information (name and qualification)			
Course name in Arabic			
Course name in English			

:Scientific content of the course

-4	-1
-5	-2
-6	-3

applicant		Signature and date	
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:Cost calculation by percentage

Side (Internal/External)	University ratio	Cost	Percentage of person responsible for the activity	Cost
Side (Internal)	%70		%30	
Side (External)	%50		%50	

Opinion of the head of the department Studies and training



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Head of Department/Division		Signature and date	

Nomination of Director of Advanced Design and Manufacturing Center

Director of Advanced Design and Manufacturing Center		Signature and date	

University President's Decision

University President		Signature and date	

:A copy for each of

- Director of Advanced Design and
- Manufacturing Center
- CFO