

KINGDOM OF SAUDI ARABIA

Ministry Of Education

NAJRAN UNIVERSITY

Faculty Of Dentistry



NO :

Date : / /

Attac :

## Questions booklet pass card

Date: .....

| Course name | Course code | Course number |
|-------------|-------------|---------------|
|             |             |               |

Course coordinator: .....

This is to certify that; the questions booklet of the course mentioned above has been reviewed and approved by the examination committee in the presence of the course coordinator.

Head of the examination committee