

Policy:

Students pursuing the thesis option should have at least a 3.2 cumulative GPA. All thesis applications require approval of the dean.

Students will be expected to complete their thesis by the end of the third semester (not including summer session). Students who require additional time to complete their thesis will be required to apply for an extension. The selected academic advisor must be a full time program-affiliated assistant, associate or full professor at KAUST. This advisor can only become project affiliated for the specific thesis project with program director approval.

Students who withdraw from the thesis option will be required to complete a thesis withdrawal form. Students who withdraw from the thesis option after the last day to drop will receive a W on their official record.

For more information, please check the **Program Guide** on the Registrar's website.

Instructions:

- To apply for thesis, complete sections A, B, attach your unofficial transcript and send to your GPC to start the workflow on DocuSign.
- To withdraw a thesis specialization, complete **D** of the existing form. (Only for programs that offer thesis specialization as an option).
- Note: Registration may be updated to proper research type.

Section A: Student information				
Student Name			KAUST ID	
Program (e.g. AMCS) Degree/		(e.g. M.Sc./Ph.D.)	Semester	_ Year
Student's signature	Date .		(DD-MMM-YY	YY)

I have generated my unofficial transcript via Portal and attached it to my thesis application for further review.

Section B: Thesis Proposal

Please write a well-constructed thesis proposal endorsed by the academic advisor, including a time line for completion not to exceed three semesters (not including summer session).

Timeline for thesis progress: (in line with start Thesis Start Date	and end dates	s of sen	lesters	56221		ed End Da	te	
*Check this box only if your thesis supervisor	is not your ex	isting a	cadem	- nic advi	sor,			
New Advisor/Co-Advisor Name					(Must be affiliated	l with the p	orogram)	
Section C: Official use								
As the academic advisor, I confirm this p	proposal is aca	demica	ally via	ble anc	l can be completed	within the	projected timelir	Ie.
		Appro	ved		Signature		Date	
Academic Advisor	Yes	0	No	0				
New Academic Advisor	_ Yes	0	No	0				
Academic Co-Advisor	Yes	0	No	0				
araduate Program Coordinator								
Program Chair	Yes	0	No	0				
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Section D: Reason for withdrawing from these	Processed	d/Rece	ived	_				
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Revised Aug 2021