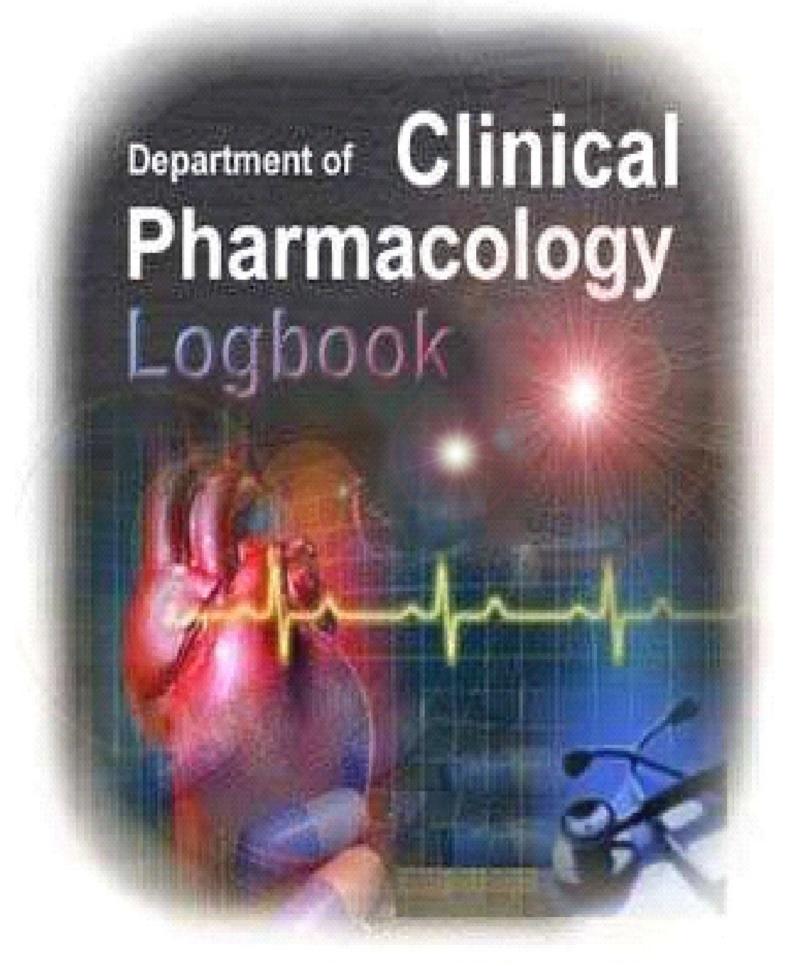


Demonstrator



Personal Data

Name: Date of Birth:	Put your picture here
Home Address:	TO STY
Telephone Number:	
E-mail Address:	
M.B., B. Ch.: Date: Degree:	
Present Job: Work address: Mansoura Univ Pharmacology Date of appointment:	
Master Degree: Date of registration: Date of graduation (1 st part): Date of discussion of thesis: Date of graduation (2 nd part): Final degree:	
Head of the Department	Vice Dean for research and postgraduate study

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Others

Demonstrator

A. Master Degree Course: Scientific Lectures (1st part):

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B. Master Degree Thesis:

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C.Scientific Activities:

Seminars:

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Conferences:

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Thesis Discussion:

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Training Courses and Workshops:

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D.Other Activities at the Department: Student Sections:

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