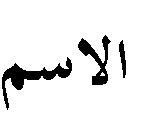
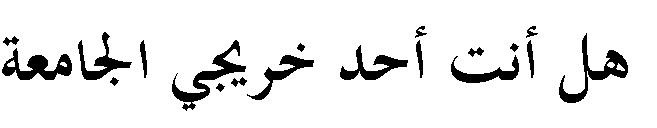
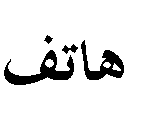
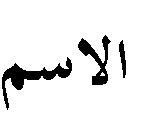
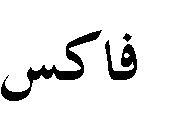
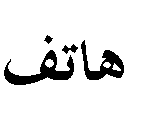
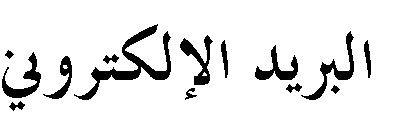
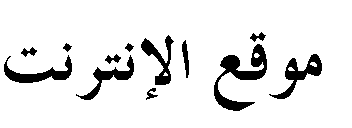
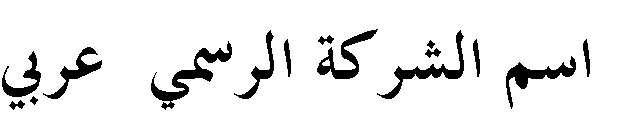
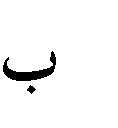
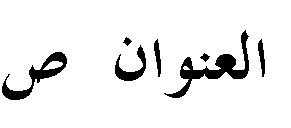


# Employment & Training

 CONTACT GUIDE DURING TRAINING



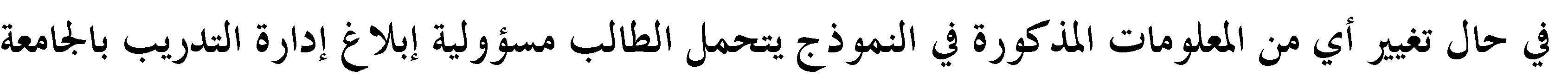
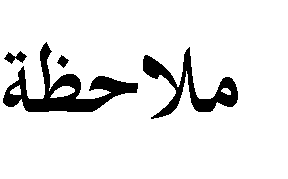
**G**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Company Info.** | **( )** | | | |  |
| Company Official Name (English) | | | |
| Web address | | Address / P.O.Box **. . /** | |
| email | | Zip code | city |
| Phone | Fax | Country | Region |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Mentor** | Position | | Name | |  |
| Are you A KFUPM Alumni | | email | |
| KFUPM ID | yes | Phone | Fax |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Student** | email | | Name | | |  |
| Work Phone | Mobile | | KFUPM ID | |
| KFUPM COOP Advisor | | | | Major |

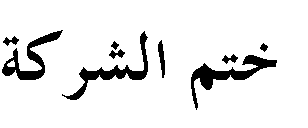
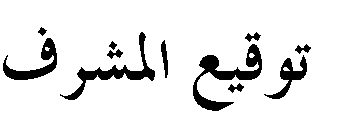
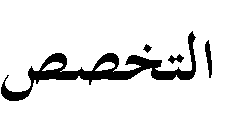
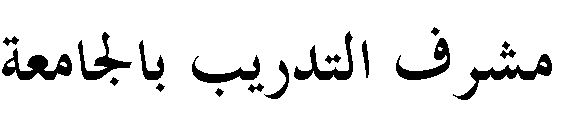
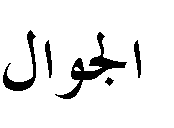
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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Training** | Actual Starting of the training | | | | | Position | | | |  |
| Ending date of the training | | | | | Place of Training | | | |
| Transportation |  |  | Housing |  |  | Monthly Salary |  |  |
| Other Benefits |  | | | | | | |  |

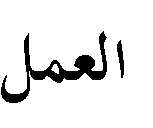
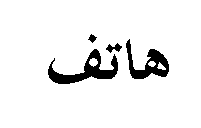
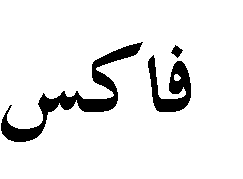
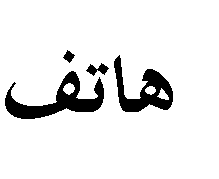
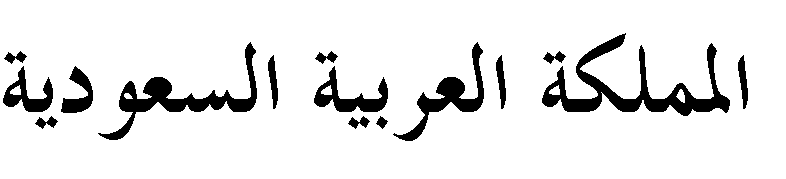
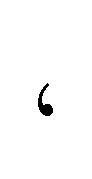
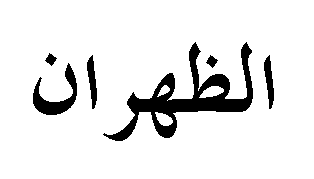
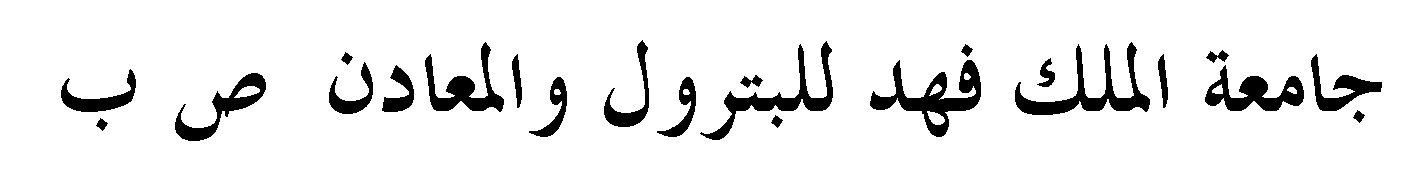
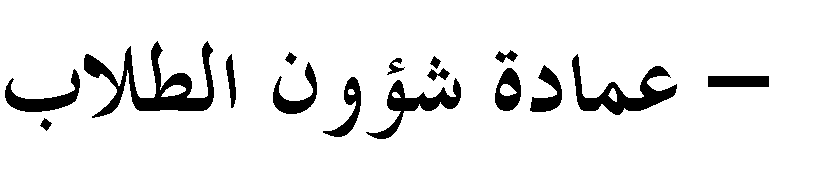
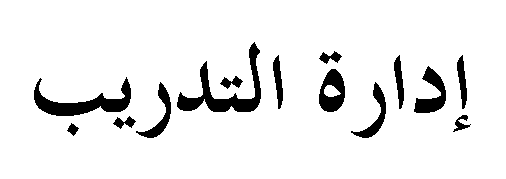
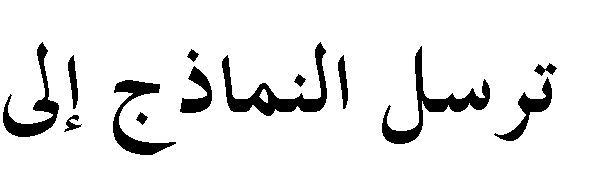
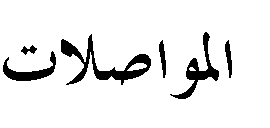


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**:**

|  |  |  |
| --- | --- | --- |
| Company Stamp | Mentor Signature | Student Signature |
|  |  |  |

Please send the completed forms to: **:**



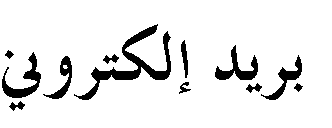
**التدريب إدارة**

Training Dept.

Training Department – Student Affairs

KFUPM – P.O. Box 5028

Dhahran 31261, Saudi Arabia



**5028 .**

**31261**

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