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**Postgraduate Studies and Research**

**Faculty of Veterinary Medicine South Valley University**

**EXAMINATION BOARD APPROVAL SHEET**

This is to certify that the thesis prepared by **…………………………………………...,** entitled **"*……………………………………………………………………………….***", submitted in fulfillment of the requirements for the degree of **Master** or **Doctorate of Philosophy** of Veterinary Medicine in ……………… has been examined and approved by the Examination Committee.

Qena, 30th November 2023.

**Examination Committee,**

|  |  |
| --- | --- |
| Name | Signature  |
| 1. Prof. Dr. Professor of ……………………………., Department of ………………, Faculty of …………,…………. University.Chairman and External Examiner)) | …………………………… |
| 2. Prof. Dr. Professor of ……………………………, Department of ………….., Faculty …………………, ……………. University. (External Examiner) | …………………………… |
| 3. Prof. Dr. Professor of ………..............................., Department of……………., Faculty ………………, ……………… University. Member, Internal Examiner)) | …………………………… |
| 4. Prof. Dr.Professor of **……………………………,** Departmentof ……………., Faculty ………..……, ……………….University.Member, Internal Examiner))  | …………………………… |

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**Postgraduate Studies and Research**

**Faculty of Veterinary Medicine South Valley University**

**APPROVAL SHEET**

**Name of candidate: …………………………………………………………………**

**Thesis Title: "**…………………………………………………………………………"

**Degree: Master** or **Doctorate of Philosophy** of Veterinary Medicine in …………...

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| --- |
| ***Supervisors:*** |
| 1 | **Prof. Dr.** Professor of ……………………., Department of …………………….., Faculty of ……….., South Valley University.  |
| 2 | **Prof. Dr.** Professor of ……………………., Department of …………………….., Faculty of ……….., South Valley University. |
| 3 | **Prof. Dr.** Professor of ……………………., Department of …………………….., Faculty of ……….., South Valley University. |

|  |  |
| --- | --- |
| **Examination Committee** | **Signature** |
| 1 | **Prof. Dr.** Professor of ……………, Department of …………, Faculty of …………………………, ………………. University. | …………………………… |
| 2 | **Prof. Dr.** Professor of ……………, Department of …………, Faculty of …………………………, ………………. University. | …………………………… |
| 3 | **Prof. Dr.** Professor of ……………, Department of …………, Faculty of …………………………, ………………. University. | …………………………… |
| 4 | **Prof. Dr.** Professor of ……………, Department of …………, Faculty of …………………………, ………………. University. | …………………………… |

**Approval date: -**