FACULTY FULL NAME: Khalid Saleh Ali Alghamdi

POSITION: demonstraor

Personal Data

Nationality | Saudi

Date of Birth | 20-09-1995

Department | Radiological sciences

Official UoD Email | ksaghamdi@iau.edu.sa

Office Phone No. |

Language Proficiency

Language	Read	Write	Speak
Arabic	#	#	#
English	#	#	#
Others			

Academic Qualifications (Beginning with the most recent)

Date	Academic Degree	Place of Issue	Address
15-06-2018	Bachelor of radiological sciences	Imam Abdulrahman Bin Faisal Univesity	Alkhobar

PhD, Master or Fellowship Research Title: (Academic Honors or Distinctions)

PhD	
Master	
Fellowship	

Professional Record: (Beginning with the most recent)

Job Rank		Place and Address of Work		Date
demonstrator		Imam Abdulrahman Bin Faisal Univesity		10-1-1440

Administrative Positions Held: (Beginning with the most recent)

Administrative Position	Office	Date

Scientific Achievements

Published Refereed Scientific Researches
(In Chronological Order Beginning with the Most Recent)

#	Name of Investigator(s)	Research Title	Publisher and Date of Publication

Refereed Scientific Research Papers Accepted for Publication

#	Name of Investigator(s)	Research Title	Journal	Acceptance Date

Scientific Research Papers Presented to Refereed Specialized Scientific Conferences

#	Name of Investigator(s)	Research Title	Conference and Publication Date

Completed Research Projects

#	Name of Investigator(s) (Supported by)	Research Title	Report Date

Current Researches

#	Research Title	Name of Investigator(s)

Contribution to Scientific Conferences and Symposia

#	Conference Title	Place and Date of the Conference	Extent of Contribution

Membership of Scientific and Professional Societies and Organizations

-
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Teaching Activities

Undergraduate

#	Course/Rotation Title	No./Code	Extent of Contribution (no. of lectures/Tutorials. Or labs, Clinics)
	CT clinical practice II	RADL 423	8 weeks
	MRI clinical practice	RADL 424	8 weeks

Brief Description of Undergraduate Courses Taught: (Course Title – Code: Description)

Postgraduate

#	Course/Rotation Title	No./Code	Extent of Contribution (no. of lectures/Tutorials. Or labs, Clinics)
1			
2			

Brief Description of Postgraduate Courses Taught: (Course Title – Code: Description)

1	
2	

Course Coordination

#	Course Title and Code	Coordination	Co-coordination	Undergrad.	Postgrad.	From	To

Guest/Invited Lectures for Undergraduate Students

#	Activity/Course Title and Code	Subject	College and University or Program	Date

Student Academic Supervision and Mentoring

#	Level	Number of Students	From	To

Supervision of Master and/or PhD Thesis

#	Degree Type	Title	Institution	Date

Ongoing Research Supervision

#	Degree Type	Title	Institution	Date

Administrative Responsibilities, Committee and Community Service (Beginning with the most recent)

Administrative Responsibilities

#	From	To	Position	Organization

Committee Membership

#	From	To	Position	Organization

Scientific Consultations

#	From	To	Institute	Full-time or Part-time

Volunteer Work

#	From	To	Type of Volunteer	Organization

Personal Key Competencies and Skills: (Computer, Information technology, technical, etc.)

1	Computer skills
2	teamwork

Last Update

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