Mohammad Hassan A Alshehri

Demonstrator

Personal Data

Nationality | SAUDI

Date of Birth | July 15, 1996

Department | Physical therapy

Official IAU Email | mhaalshehri@iau.edu.sa

Office Phone No. | non

Language Proficiency

Language	Read	Write	Speak
Arabic	Excellent	Excellent	Excellent
English	Good	Intermediate	Good

Academic Qualifications (Beginning with the most recent)

Date	Academic Degree	Place of Issue	Address
May. 2018	Bachelor of Sciences	KSA	King Khaled university

Professional Record: (Beginning with the most recent)

Job Rank	Place and Address of Work	Date
Demonstrator	Imam Abdulrahman bin Faisal University	2019 till now

Administrative Positions Held: (Beginning with the most recent)

Administrative Position	Office	Date
non		
non		

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
	non		

Refereed Scientific Research Papers Accepted for Publication

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

Scientific Research Papers Presented to Refereed Specialized Scientific Conferences

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

Completed Research Projects

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

Current Researches

#	Research Title	Name of Investigator(s)
	non	

Contribution to Scientific Conferences and Symposia

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

Membership of Scientific and Professional Societies and Organizations

- non
- non

Teaching Activities

Undergraduate

#	Course/Rotation Title	No./Code	Extent of Contribution (no. of lectures/Tutorials. Or labs, Clinics)
1	Physiotherapy examination procedure	PT 224	Secondary instructor
2	Pediatrics	PT 421	Secondary instructor
3	Pediatrics PT	PT 423	Secondary instructor
4	Pediatrics surgery	PT 422	Secondary instructor
5	Clinical practice IV	PT 427	Secondary instructor

Br	rief 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

#		Coordinati			Postgrad	From	To
	Code	on	coordination	ad.	•		

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
1	2019	Now	Member	Neuropedia research group
2	2020	Now	Member	Quality Committee
3	2020	Now	Member	Alumni group

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	Research
2	Statistics
3	teaching
4	Coordination



Last Update

19/07/2020