جامعة البمام عبدالرحمن بن فيصل IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY
مستشفى الملك فهد الجامعي King Fahd Hospital of the University عمادة الجودة والإعتماد الأكاديمي Deanship of Quality & Academic Accreditation إدارة الجودة والسلامة Directorate of Quality & Safety
 "Preparation for Certified Professional in Health Care Quality Training" (CPHQ) Venue: Building 500, King Fahd Hospital of the University Time: 9:00 AM - 3:00 PM PLEASE TYPE OR PRINT YOUR NAME CLEARLY AS YOU WANT IT TO APPEAR ON YOUR CERTIFICATE OF ATTENDANCE AND RETURN THIS FORM THROUGH: EMAIL to dqaa.dqs@iau.edu.sa
GENDER Male Female
TITLE Prof. Dr. Mr. Mrs. Ms.
DATES April 5 - 9, 2020 September 27 - October 1, 2020
First Name Last Name
Profession/Specialty Saudi Council Professional No
Institution/Hospital
Telephone No. (Including Information Dialing Code)
Mobile No Fax No
Email Address
Mailing Address (city with postal code / country)
Important information:
 Registration is not confirmed until payment is received. Payment is not accepted in cash, only bank transfer. Deposit registration fee to: Account Name: Imam Abdulrahman Bin Faisal University Account No. IBAN: SA3810000005290292000109 Bank: National Commercial Bank Send payment and registration form or copy of your deposit slip to: Directorate of Quality & Safety Fax: +966 13 8966731 Email: dqaa.dqs@iau.edu.sa Cancellation/Refund Policy: Request for refund must be received one week prior to the course. Administrative fee 20% of the total registration fee (whichever is greater) will be deducted from all refunds.