Kingdom of Saudi Arabia

Ministry of Education University of Bisha College of Medicine



المملكة العربية السعودية وزارة الـتعـلـيم جامعــة بيشـــة كلـــنة الطـــب

Exam Questions Form

Course Name :

Year /Semester :

Course Coordinator :

Course Code :

Course Duration (wks.):

Signature :

| Theme no | Activity | Educational Outcomes | Questions | Knowledge | Understanding | Application | Attitude | Psychomotor | Reference |
|-------------|------------|----------------------|-----------|-----------|---------------|-------------|----------|-------------|-----------|
| | Title Type | | Questions | | | | | | |

Course Coordinator:

Student Assessment committee:

Signature

Signature