

Thesis Evaluation Form

First Name:		Last Name:	2:	
Program:		School:		
	Sc. 🗆	МРН 🗆		
Thesis Topic:				
Date of the Meeting:		Time:	::	
Mark (article mark not included): Article Submitted Article Accepted/published				
<u>Comment:</u>			 Providing the proof of a submitted artic defense. Two marks allotted for an accepted/pub 	
Names and Signatures of the Committee Members:				
• Supervisors:		Name	Signature	
	1			
	2-			
Advisors:	1			
	2			
Other Examiners:	1			
	2			
	3-			
	4			

IC-TUMS Vice Dean for Research Affairs