

Thesis Evaluation Form

First Name:			Last Name:			
Program:			School:			
	1.Sc. □	МРН 🗆				
Thesis Topic:						
Date of the Meeting:			Time:			
Mark (article mark not in	ncluded):	Arti	cle Submitted 🛚	Article Acc	cepted/published	
<u>Comment:</u>					 Providing the proof of a submit defense. Two marks allotted for an accept 	
Names and Signatures o	f the Comr	nittee Members	5 :			
• Supervisors:		Name			Signature	
	1-					
	2-					
• Advisors:						
	1-					
	2-					
Other Judges:	1-					
	2-			-		
	3-			-		
	4-					
School Vice De	fa Da				SVice Dean for	

Research Affairs

School Vice Dean for Educational Affairs



Thesis Evaluation Form

First Name:		Last Name:	
Program:		School:	
	D 🗆	PhD by Research □	
Thesis Topic:			
Date of the Meeting:	1ark:	Time: Article acceptance/publication □	
Comment: Names and Signatures of	the Committee Mem	bers:	 PhD students must have 2 published/accepted articles prior to their defense. PhD by research students must have 3 published/accepted articles prior to their defense.
• Supervisors:	Nar	ne	Signature
	1-		
	2-		
Advisors:			
	1-		
	2-		
• Internal Judges:			
	1		
	2		
• External Judges:			
	3-		
	4-		
School Vice Dea	 nn for Research Affa	airs / IC-TUM	S Vice Dean for

Research Affairs

School Vice Dean for Educational Affairs



Thesis Evaluation Form

Full Name:		Program:
Level:		School:
Thesis Topic:		
Date of the Meeting:		Time:
Mark: Arti	icle acceptance/publication \Box	The candidates in specialty level must have at least one published/accepted article with their name as the first author or
<u>Comment:</u>		corresponding author prior to their defense. ✓ If the article is resulted from the thesis, the maximum mark will be 20, ✓ If the article is not resulted from the thesis, the maximum
Names and Signatures of	the Evaluation Committee	magnitus and the same
• Supervisors:	Name	Signature
	1-	
	2-	-
• Advisors:	1-	
	2-	
Other Judges:	,	
	1-	
	2-	
	3-	-
	4-	
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Research Affairs

School Vice Dean for Educational Affairs