

Thesis Evaluation Form

First Name:			Last Name:			
Program:			School:			
Level:	M.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 submitte defense. Two marks allotted for an accepte 	
Names and Signatures of the Committee Members:						
• Supervisors:		Name			Signature	
	1-					
	2-					
Advisors:	1-					
	2-					
• Other Judges:	1-					
	2-			-		
	3-			-		
	4-					
School Vice I	Dean for Res	 earch Affairs	/ 1	C-TUMS	Vice Dean for	

IC-TUMS Vice Dean for Research Affairs