



Thesis Evaluation Form

First Name:	Last Name:
Program:	School:

Level: PhD PhD by Research

Thesis Topic:

Date of the Meeting:

Time:

Mark:(Out of 20)

Article acceptance/publication

Comment:

❖ **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.

Names and Signatures of the Committee Members:

- Supervisors:

Name

Signature

1- _____

2- _____

- Advisors:

1- _____

2- _____

- Internal Judges:

1- _____

2- _____

- External Judges:

3- _____

4- _____

School Vice Dean for Research Affairs /
School Vice Dean for Educational Affairs

IC-TUMS Vice Dean for
Research Affairs