**Thesis Proposal Evaluation Form**

**Student’s Information**

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| --- | --- | --- |
| **Full Name:** | **Student Number:** | **Nationality:**  |
| **Phone Number:**  | **Email Address:** |
| **Program:**  | **Department:**  |
| **School:**  | **Year and Month of Admission:** |
| **Date of proposal Submission:** | **File/Registry Number:** |

|  |
| --- |
| **Title:****Question/Problem statement:****Objectives (General and Practical):****Method in brief:** |

 ***Proposed Thesis: (*A completed proposal submission form must be attached to this form*)***

|  |  |  |
| --- | --- | --- |
| **1st Supervisor** | **Name and Signature:** | **Academic Rank:** |
| **2nd Supervisor** | **Name and Signature:** | **Academic Rank:** |
|  **1st Advisor** | **Name and Signature:** | **Academic Rank:** |
| **2nd Advisor** | **Name and Signature:** | **Academic Rank:** |

 **Research Team**

**Step 1: Evaluation of the Proposal by the Department**

**This proposal was evaluated by the department and the following decision was made:**

***Decision:***

**🞎 Approved**

**🞎 Conditionally Approved (needs revision)**

**🞎 NOT Approved**

|  |
| --- |
| **Comments:** |

|  |  |  |
| --- | --- | --- |
| **Date of Evaluation** | **Department Educational Rep.** | **Signature of Department Dean**  |
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**Step 2: Evaluation of the Proposal by the School’s Postgraduate Council**

**This proposal was evaluated by the School’s Postgraduate Council and the following decision was made:**

***Decision:***

**🞎 Approved**

**🞎 Conditionally Approved (needs revision)**

**🞎 NOT Approved**

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| --- |
| **Comments:** |

|  |  |  |
| --- | --- | --- |
| **Date of Evaluation** | **Signature of School’s Vice Dean for Education** | **Signature of School’s Vice Dean for Research** |
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