



Name:

Degree:

Student ID:

Supervisor:

Admitted:

Dissertation Title  
OR

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Research Papers  
(Th.M. Only)

Advisor	Topic/Title

Evaluation

	Excellent	Satisfactory	Inadequate
Comprehensive Knowledge			
Dissertation/Papers			
Overall Recommendation: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/ conditions <input type="checkbox"/> Not Approved			
Comments/ Conditions _____ _____ _____			

Signatures

Date:	
Supervisor:	
Member:	
Member:	
Academic Dean:	