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| Date: ….. /..... /20....  Issue :………  **TO THE INSTITUTE OF GRADUATE PROGRAMS**   * + - * 1. The ….. **th** meeting of our Ph. D student, .............................................. has been held on …… / …… / 20 and the result is given below.         2. Kindly submitted to your information.   Head of the Department  Signature |
| * + - * 1. **I- STUDENT INFO**   **Student ID :** ……………………………………  **Full Name :** .........................................................  **Program :**.........................................................  **Department :** .........................................................  **Academic Year** **:** 20.… - 20.… Fall  Spring  |
| * + - * 1. **II- MEETING OF THESIS MONITORING**   **Meeting Period** :  January- June 20....  July – December 20....  **Meeting Number** :  1st  2nd  3rd   4th  5th  6th  7th  **Date of Report**  : …… /…… /20.... |
| **Title of Dissertation :** ………………………………………………………………………………………………  ………………………………………………………………………………………………………………………… |
| **III- EVALUATION**  The attached progress report given by the Committee and the work plan to be made in the next period have been evaluated and found SUCCESSFUL / FAIL by UNANIMITY / MAJORITY VOTE.  The Committee has decided that the next meeting will be held in ........ months.  The thesis subject has been changed depending on the essence of the thesis. (TIK report will be added).  The committee has decided that the student has completed the thesis work and the thesis defense jury will be formed.  **Supervisor Member Member**  Title, Full Name **:** ……………………………………………………………………………………..…………….  Signature **:** …..……………..…………………………………………………………………………………. |
| **Attachment :** The summary of the report prepared by the student (It should include only the work done during the semester and the work to be done in the next semester).  **NOTE:** The meetings should be held twice a year and there should be at least 5 months between them. |