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| --- | --- |
| Name, Surname |  |
| Student Number |  |
| Doctoral Programme |  |
| Thesis Topic |  |
| Meeting Period |  202... - 202... [ ]  July-December (Fall Semester) [ ]  January–June (Spring Semester) |
| Course Code |   |

Thesis Monitoring Committee Opinions (Additional pages may be used for explanations.)

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| The Thesis Monitoring Committee met on .../ .../ 202.. and evaluated the student's thesis progress report and work plan for the next semester, and the following decision was taken by UNANIMOUS VOTE / MAJORITY VOTE\*:**Successful Unsuccessful** **\*** A report containing the opposition's reasons for the decision taken by majority vote must be attached. |
| **Thesis Advisor****Signature****Title Name Surname** | **Thesis Monitoring Committee Member****Signature****Title Name Surname** | **Thesis Monitoring Committee Member****Signature****Title Name Surname** |

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| **The thesis work of the aforementioned student has been evaluated by the Thesis Monitoring Committee, and the decision taken is stated above. I hereby submit this information for your consideration.** |
| .…/.…/202.. |
| **Signature****Title Name Surname** **Head of Department** |

**NOTE:** Students must submit a written report to the committee members at least one month before the meeting date. This report should include a summary of the work done so far and a work plan for the next semester.