



TED UNIVERSITY

Thesis Defense Form

EYS.LPE.FR.011-ENG

STUDENT'S

Full Name	
Student ID	
Graduate Program	☐ Master ☐ PhD.
Graduate Program Name	
Full Name of the Supervisor	
Full Name of the Co-Supervisor (If any)	
Dissertation Title (Please write in English)	☐ Dissertation title has ben changed.
Date, time and place of the defense	

JURY MEMBERS

Title and Full Name		Decision	Signature
Chair		☐ Pass ☐ Revision ☐ Fail	
Supervisor		☐ Pass ☐ Revision ☐ Fail	
Member		☐ Pass ☐ Revision ☐ Fail	
Member		☐ Pass ☐ Revision ☐ Fail	
Member		☐ Pass ☐ Revision ☐ Fail	

DECISION OF THE JURY

(Must be filled by the Chair of the Jury)

The jury conducted the defense examination for the thesis entitled
.....at
..... on/...../..... In accordance with the TEDU Rules and Regulations Governing Graduate Education, questions about the thesis were directed to the student and based on all relevant assessments the jury

☐ With consensus ☐ By absolute majority

reached at the following decision

☐ APPROVED ☐ NOT APPROVED ☐ REVISION REQUIRED

Please deliver the original form to the Graduate School with an Inter-Office Memorandum via EBYS through the physical object delivery process within 3(three) days.

Students in Master's programs who are given a revision are required to undergo a second thesis defense within three (3) months.

Students in PhD programs who are given a revision are required to undergo a second thesis defense within six (6) months.

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RESTRICTED