

DOCTORAL QUALIFYING EXAM REPORT

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STUDENT'S						
Full Name						
Student ID						
Doctoral Program						
Full Name of the the Disser	tation Supervisor					
Date, time and place of the	exam					
The date of the previous qu (If taken before)	alifying exam					
PROGRAM DIRECTOR						
The final decision for the student listed above on the Ph.D. Qualifying Exam is as follows.						
Date / Name-Surname / Signature						
EXAMINATION REPORT						
The student listed above is assessed in both oral and written exams by the Doctoral Qualifying Exam						
Committee on/ and the final decision for the student is as follows;						
□ SUCCESSFUL □	□ SUCCESSFUL □ UNSUCCESSFUL					
☐ WITH CONSENSUS □	BY ABSOLUTE	MAJORITY				
DOCTORAL QUALIFYING COMMITTEE						
Title, Full Name			Signature			
Head of the						
Committee						
Member Member	_					
	_					
Member	_					
Member						
DIRECTOR OF THE GRADUATE SCHOOL						
To the Directorate of Student Affairs,						
The final decision for the student listed above on the Doctoral Qualifying Exam is as follows						
□ SUCCESSFUL □ UNSUCCESSFUL						
Date / Name-Surname / Signature						
Annex: Jury report						
J J						

a three year period by the Executive Board of the Graduate School based on the recommendation of the Graduate Program Directorate.