Program of study Thesis Advisor's Name Thesis Co-Advisor's Name Thesis Title (in English) (Use Capital Letters Only)	Doctora
Semester       Academic Year         Time       Receiver         Student Name (Mr./Ms./Mrs.)       Image: Student ID         Program of study       Student ID         Thesis Advisor's Name       Master         Thesis Title (in English) (Use Capital Letters Only)       Master	Doctora
Semester       Academic Year       Receiver         Student Name (Mr./Ms./Mrs.)       Image: Constraint of Study       Student ID         Program of study       Student ID       Student ID         Thesis Advisor's Name       Image: Constraint of Study       Master         Thesis Title (in English) (Use Capital Letters Only)       Image: Constraint of Study       Image: Constraint of Study	Doctora
Semester       Academic Year         Student Name (Mr./Ms./Mrs.)       Image: Constraint of Study         Program of study       Student ID         Thesis Advisor's Name       Image: Constraint of Study         Thesis Co-Advisor's Name       Image: Constraint of Study         Thesis Title (in English) (Use Capital Letters Only)       Image: Constraint of Study	Doctora
Student Name (Mr./Ms./Mrs.)   Program of study.   Thesis Advisor's Name.   Thesis Co-Advisor's Name   Thesis Title (in English) (Use Capital Letters Only)	
Program of study Thesis Advisor's Name Thesis Co-Advisor's Name Thesis Title (in English) (Use Capital Letters Only)	
Thesis Advisor's Name Master	
Thesis Advisor's Name	
Thesis Title (in English) (Use Capital Letters Only)	
	•••••
Thesis Defense Examination Date Time	
	•••••
Venue	
The Evaluation by the Thesis Examination Committee:	
Passed	
Passed with conditions (please specify the conditions and time limit. Conditions must be met with days. If there are much requires conditions, please use an additional paper.)	11n 90
days. If there are inden requires conditions, prease use an additional paper.)	
Not passed; the student must register to retake the thesis proposal examination on (specify date)	
	••••
	••••
Signature	••
()	
Thesis Advisor	
Date//////	

- the thesis committee within the suggested period, you must provide the reasons and request for a permission for an extension from the Chairperson of the respective Program Management Committee.
- Students must submit the complete theses and the thesis contents recorded on a CD to Office of Academic Support Division not later than 21 days after the Institute has announced that you have passed the thesis examination. For late submissions, you will be fined at the rate specified in the CGI regulations. However, you may delay the thesis submissions for 90 days after the deadline with approval by Program Director in the request form (F01).
- If the Office of Academic Support Division does not receive the complete theses and the thesis contents recorded on a CD within 90 days after the deadline, the thesis examination results will be annulled. If you still wish to graduate, you must rewrite the thesis.
- I hereby confirm that I have been informed the result of the Thesis Defense Examination, including the condition to submit the complete theses and the thesis contents recorded on a CD to Office of Academic Support Division within the deadline as stated in the above information.

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Student's signature			••••		 ••••	•••••
Date	/	· <b></b> .		/.	 	