



Chulabhorn Graduate Institute

T 10

THESIS EVALUATION FORM (By Individual Committee)

Academic Support Division

Date Receipt.....

Time.....

Receiver.....

Semester.....Academic Year.....

Student's Name (Mr./Ms./Mrs.).....

Program of Study

Thesis Advisor's Name.....

Thesis Co-Advisor's Name

Approved Thesis Title

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Thesis Defense Examination DateTime

Venue

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Student ID

☐ Master

☐ Doctoral

Evaluation

Part I: Thesis (50 marks)	Marks
Research Problem and Significance (5 marks)	
Literature Review (5 points)	
Scope of Research and Research Design (5 marks)	
Research Methodology (10 marks)	
Results and Discussion (10 marks)	
Conclusion (5 marks)	
Potential for Publication in Peer-reviewed Journals (10 marks)	
Part II: Presentation (50 marks)	Marks
Content and Style (30 marks)	
Answering Questions (20 marks)	
Total (100 points)	

Committee Member's Additional Comments (please attach additional sheets of paper as appropriate)

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Signature.....

(.....)

Committee Member

Date/...../.....

Remarks

- 1) 90 – 100 = Outstanding / 80 – 89 = Very Good / 70 – 79 = Acceptable / Below 70 =Unacceptable
- 2) This form must be submitted to the Chairperson of the Thesis Defense Committee after the Thesis Defense Examination.
- 3) All the complete forms must be kept at the Office of Academic Support Division.