



SEMINAR ASSESSMENT FORM

STUDENT'S

Name-Surname :

Number :

Department :

Advisor :

Title of Seminar :

.....

Programme : Master Ph.D.

SEMINAR'S:

Date : .../.../20....

Hour : ... : ...

Place :

...../...../20...

EXAM REPORT

The student whose name and surname are mentioned above, presented the seminar of thesis study. The result of seminar lesson is given below.

SUCCESSFUL

UNSUCCESSFUL

DID NOT PARTICIPATE (Evaluated as unsuccessful)

Advisor

Head of Department