

**ÇUKUROVA UNIVERSITY**

**INSTITUTE OF HEALTH**

**SCIENCES**

**DOCTORAL PROFICIENCY EXAM REPORT**

Date:    /    /

**STUDENT INFORMATION**

**Name and surname** :      

**Institute Registration Number** :

**Faculty/Collage** :

**Department** :

**Semester** :

**Advisor** :       Dr.      

|  |  |  |
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| **MEETING INFORMATION** | | |
| **Exam Place**: | **Date:**    **/**   **/** | **Time:** **:** |

**EVALUATION**

Our Committee/Jury, stated above, has assessed the success of the Ph.D. student in written and oral examinations and reached the conclusion that the student is knowledgeable in fundamental subjects and related areas of their doctoral research. The student is deemed to **have**  **have not**\*  acquired sufficient competence and therefore, they are considered **successful**  **unsuccessful**\*  in the qualifying examination with **consensus**  **majority of votes**  decision.

**QUALIFICATION JURY**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Title-Name-Surname** | **Institution** | **Signature** |
| **President** | Dr. |  |  |
| **Member** | Dr. |  |  |
| **Member** | Dr. |  |  |
| **Member** | Dr. |  |  |
| **Member** | Dr. |  |  |
| **Member** | Dr. |  |  |
| **Member** | Dr. |  |  |

**QUALIFICATION COMMITTEE**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Title-Name-Surname** | **Institution** | **Signature** |
| **President** | Dr. |  |  |
| **Member** | Dr. |  |  |
| **Member** | Dr. |  |  |
| **Member** | Dr. |  |  |
| **Member** | Dr. |  |  |

\* **According to Cukurova University Graduate Education Regulations, the reasons of the member(s) who cast negative votes will be added to the minutes.**

**APPENDIX:** 1- Written Examination Document with each page signed by the Jury

2- Doctoral Qualifying Oral Exam Reports

3- Foreign Language Certificate (For those who come with Student Amnesty)