

National Tsing Hua University
Ph.D. Program in Education Sciences
Qualification Exam Assessment Review Form

Date:

| | | | |
|----------------------------|---|--------------|--|
| Student Name | | Year | |
| | | Student ID | |
| Qualification Thesis Title | | | |
| Test Time | Oral Exam _____ | Written Exam | |
| Oral Exam Results | <input type="checkbox"/> Passed: Research may proceed according to the original plan <input type="checkbox"/> Not Passed | | |
| Written Exam Results | <input type="checkbox"/> Passed: Research may proceed according to the original plan <input type="checkbox"/> Not Passed | | |
| Assessment Results | | | |

NTHU Committee Member: _____ (Signature) Date:

External Committee Member: _____ (Signature) Date:

Advisor: _____ (Signature) Date: