



## FACULTY SUMMARY ASSESSMENT REPORT FORM – DOCTORAL THESIS

SECTION A: Candidate Details											
Surname						Initials			Title		
Student Number											
Qualification (e.g. PhD)											
Discipline (e.g. Physics)											
Title of thesis											
Date of first registration for this degree											

SECTION B: Supervisor and Thesis Assessor details											
SUPERVISOR Surname						Initials			Title		
Affiliation / Employer											
Highest academic qualification											
CO-SUPERVISOR Surname						Initials			Title		
Affiliation / Employer											
Highest academic qualification											
ASSESSOR 1 Surname						Initials			Title		
Affiliation / Employer											
Highest academic qualification											
ASSESSOR 2 Surname						Initials			Title		
Affiliation / Employer											
Highest academic qualification											
ASSESSOR 3 Surname						Initials			Title		
Affiliation / Employer											
Highest academic qualification											
(If applicable) ADDITIONAL ASSESSOR Surname						Initials			Title		

<b>Affiliation / Employer</b>				
<b>Highest academic qualification</b>				
<i>(If applicable)</i> <b>EXPERT ADVISOR Surname</b>		<b>Initials</b>		<b>Title</b>
<b>Affiliation / Employer</b>				
<b>Highest academic qualification</b>				
<i>(If applicable)</i> <b>ARBITER Surname</b>		<b>Initials</b>		<b>Title</b>
<b>Affiliation / Employer</b>				
<b>Highest academic qualification</b>				

<b>SECTION C: Supervisor Summary of Assessment Reports</b>	<i>[completed by Supervisor]</i>
<i>[add more pages if needed]</i>	

<b>SECTION D: Meeting of Requirements for the Degree</b>				
Thesis submitted through <i>Turn-It-In</i> , and/or other tests done for originality of the thesis?	Yes		No	
All corrections have been made and a letter specifying the corrections made has been submitted	Yes		No	
<i>(delete which not applicable)</i> Two accredited research publications / proof of acceptance of two accredited research publications have been submitted	Yes		No	
Research publication submitted through <i>Turn-It-In</i> , and/or other tests done for originality of the article?	Yes		No	
Signature of supervisor	Date			
Signature(s) of co-supervisor(s)	Date			
Signature of Head of Department	Date			

<b>SECTION E: Assessment Recommendations by Assessors</b>				
	Approved	Approved with minor corrections	Reassessed	Rejected
ASSESSOR 1				
ASSESSOR 2				
ASSESSOR 3				
<i>(If applicable)</i> ADDITIONAL ASSESSOR				
<i>(If applicable)</i> EXPERT ADVISOR				
<i>(If applicable)</i> ARBITER				
CHAIR OF FHDC SIGNATURE			DATE	

<b>SECTION F: Faculty Approval of the Assessment Results</b>	
Supervisor Signature:	Date:
HoD or HoS Signature:	Date:
Chair of FHDC Signature:	Date:

