# Examination results and evaluation of Ph.D. student per semester

*(original for Dept. of Science & Research, 1 copy student, 1 copy supervisor)*

<table>
<thead>
<tr>
<th>Code</th>
<th>Subject</th>
<th>Number of credits</th>
<th>Lecturer</th>
<th>Examination result (excellent/pass/failed)</th>
<th>Date of examination and signature of examiner</th>
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**Surname and Name:**
…………………………………………………………………

**Form of study:**
Full time/ distance/combined

**Year/semester (winter/summer):**
……………………

**Study Dept.:**
……………………

**Field of Study:**
…………………………………………………

**Fulfilled by Supervisor:**

- The evaluation of scientific work and publication activities of students, including a proposal of evaluation credits and its justification:

- Evaluation at the Department of training and the workplace, including a proposal for the assessment of teaching practice:

- Overall assessment (ISP performance and study the Rules of Procedure):

  Prague, date: 

  Signature of Supervisor:

  Signature of the Head of Dept.:

  Prague, date:

* The list of publications with recommended credits attached.
List of publications: