

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

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

Surname and Name:

Form of study:

Year/semester
(winter/summer):

Study Dept.:

Field of Study:

Full time/ combined

Code	Subject	No. of credits	Lecturer	Examination result (<i>excellent/pass/failed</i>)	Date of examination and signature of examiner

Evaluation of the 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), including the explicit opinion whether to continue/terminate study:

Prague, date:

Signature of Supervisor:

The opinion of the Head of Dept.

Prague, date:

Signature, Head of the Dept.:

The opinion of the Chairperson of Branch Board:

Prague, date:

Signature, Chairperson of the Branch Board:

* The list of publications with recommended credits attached.