

Faculty: Faculty of Health Sciences and Social work of Trnava university in Trnava

Department: _____

External educational institution: _____

Annual assessment of the PhD student

for academic year: _____

- a) in full - time form study¹
- b) in external form study

Name of PhD Student: _____

Admission to doctoral study: _____

Study branch: _____

Specialization: _____

Supervisor: _____

I. PASSED EXAMS

(passed exams, not passed prescribed exams, credits in present academic year)

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II. DISSERTATION EXAMINATION

(date of graduation, description of preparation, planned date)

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III. PhD THESIS

Title of PhD thesis: _____

State of development: _____

Possible difficulties: _____

Scheduled date for registration for the dissertation defense: _____

¹ please underline as appropriate

IV. FINAL PhD STUDENT'S EVALUATION

Supervisor's conclusion:

PhD Student's statement:

Date:

.....
PhD student's signature

IT IS PROPOSED TO:

CONTINUATION - INTERRUPTION – TERMINATION AND CHANGE IN THE FORM OF
THE PhD STUDY ²

Date:

.....
Supervisor's signature

² *please underline as appropriate*

Study plan for Academic year:

I. PhD EXAMS

(planned prescribed exams in present academic)

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II. ACTIVE PARTICIPATION IN SCIENTIFIC EVENTS

(list of conferences, dates, ...)

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III. FOREIGN STAYS

(place of stays, duration of stays, reasons of stay)

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IV. PUBLISHING ACTIVITIES

(type of publication, planned date of sending, ...)

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BRANCH COUNCIL SUGGESTION

BRANCH COUNCIL SUGGESTS TO:

CONTINUE - INTERRUPT – TERMINATE IN THE PhD STUDY ³

Chairperson of the Branch Council:

Members of the Branch Council:

³ please underline as appropriate

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Enclosure: Timetable (educational activities)
Worksheet record (in educational activities)

In Trnava, date: