



Minutes of the final oral examination (Defence) (SL / P9)

Information on the Doctoral Candidate

Registration number:

Degree programme code (according to the student record sheet/"Studienblatt"): A

Academic degree(s):

Family name:

First name:

Examination date/suggested date

Examination date (weekday, date, time):

Location of examination:

Thesis Committee

Chairperson:

Examiner:

Examiner:

Examiner:

Examiner:

Details on the examination

Questions and details on the examination (short notes):

Information on the Doctoral Candidate

Registration number:

Family name:



universität
wien

Details on the examination

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Significant reasons for a negative assessment of the examination (if there is not enough space, please use the back side of this form or a supplementary sheet):

Assessment

Stated assessment of the complete thesis committee:

Family name, first name of the examiner	Assessment *	Signature
Final grade*:		

*Grade: 1 (excellent), 2 (good), 3 (satisfactory), 4 (sufficient), 5 (insufficient)

Signature of the chairperson

Date

Signature