

PIR MEHR ALI SHAH  
**ARID AGRICULTURE UNIVERSITY RAWALPINDI**  
DIRECTORATE OF ADVANCED STUDIES

**PhD THESIS DEFENSE EVALUATION PERFORMA**

**To be filled out by the Each Member of the Thesis Defense Committee. Please return this report to the Research Coordinator of the department and submit along with minutes of the Thesis Defense**

Name of Student: \_\_\_\_\_ Date of Defense: \_\_\_\_\_

Department: \_\_\_\_\_ Degree and Thesis Title: \_\_\_\_\_

Please assign a numerical grade for each consideration listed below according to the following scale:

Unsatisfactory: < 60  
Satisfactory: 60-70  
Good: 70-80  
Very Good: 80-89  
Excellent: 90-100  
Unable to Judge: U

*\*Examiners and committee members are encouraged to consider the quality of the student's final work in the context of background, time to completion, commitment to graduate student affairs and other leadership activities, and their degree of independence in their chosen field.*

<b>Consideration</b>	<b>Thesis defense (100 Marks) 20 each Section</b>
Grasp of subject, powers of criticism and awareness of previous work	
Resourcefulness, alertness to significance of findings	
Diligence, care, technical skill in carrying out research	
Organization of presentation, findings and discussion	
Quality of presentation (audiovisual aids, lucidity, grammar, writing and presentation style)	
<b>Cumulative Score</b>	

**Recommendation (Grading options include):**

- 1) *Approved as presented*;
- 2) *Approved upon specific corrections being made* (revisions must be clearly specified and a clear timetable for completion of the revisions must be presented to the student, normally with a maximum of one month to complete the revisions);
- 3) *Rejected but with permission to re-submit a revised thesis for re-examination* (a clear timetable for completion must be presented, normally with a maximum of one year to re-submit); and
- 4) *Rejected outright*.

**Recommend:** \_\_\_\_\_

\_\_\_\_\_  
Name    Date    Signature

\_\_\_\_\_  
Position, Institution

Please check most appropriate category:

Examiner/Nominee \_\_\_\_\_ Supervisor \_\_\_\_\_ Committee Member \_\_\_\_\_

**Additional Comments:** (use additional page if necessary)  
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