

**Shahrekord University of Medical Sciences**

**School of Advanced Technologies**

**Thesis evaluation form**

**Thesis title:** “………………………………………………………………………………………….”

**Thesis number: …………. Date:** …………...

It is hereby confirmed that **…………………….** M.Sc. student in Medical Biotechnology at the faculty of Advanced Technologies, Shahrekord University of Medical Sciences, with student number of **………………** has defended her thesis in the presence of the honorable panel of referees. Based on the evaluation of the jury, this thesis has been accepted with…………mark and ……………. grade.

**The jury committee**

|  |  |
| --- | --- |
|  | 1st supervisor: **…………………………………………….……...** |
|  | 2nd supervisor: **…………………………………………………** |
|  | 1st advisor: **……………………………………………………...** |
|  | 2nd advisor: **………………………………………………………** |
|  | 1st referee: **……………………………………………………...** |
|  | 2nd referee: **……………………………………………………….** |
|  | Representative of the vice-chancellor for research and innovation: **……………………………………………………….** |

**School of Advanced Technologies**

**Research & Innovation Deputy**