



Care & Rehabilitation Sciences Thesis Meeting Report Form

Name of student:

Date of meeting:

Participating members of the thesis committee:

Chair:

Number of meeting: First Second Third Later:

Decision: Did the student meet the requirements? Yes No

Is a repetition planned? Yes No

Did the student have the opportunity to talk to the committee members without his or her supervisor being present? Yes No

Summary & specific recommendations:

(State the progress of the project, major changes in the planned work and the key recommendations and decisions made by the committee. Insert pages if needed.)

Is this the last meeting before the defense?

Yes No

If yes, does the committee agree that the project has reached the stage where a thesis can be written and that the student has a sufficient knowledge of his/her field to successfully defend the thesis?

Yes No

If yes, what is the approximate date of the defense?

If no, what does the thesis committee recommend?

How many of the 16 compulsory credit points has the student already obtained?

Does the committee approve the obtained credit points?

Yes No

If no, please specify:

Does the committee recommend attending specific courses? If so, which?

Agreement regarding publication(s) (e.g. agreement on number of manuscripts to be submitted or published up to the PhD defense and authorship):

Has the form "teaching activities" been handed in? Yes No

Please download the form from the web page Care & Rehabilitation Sciences.

Signatures of thesis committee members and student

Names & Signatures