|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **DR.10 DOCTORAL THESIS EVALUATION REPORT[[1]](#footnote-1)** | | | | | | | |
| **DOCTORAL CANDIDATE** | | | | | | | |
| **First and last name:** | | |  | | | | |
| **Registration number:** | | |  | | | | |
| **GENERAL INFORMATION ABOUT THE STUDY PROGRAMME** | | | | | | | |
| **Institution responsible for organizing the studies:** | | |  | | | | |
| **Name of study programme:** | | |  | | | | |
| **Name of partner institution** *(in case of dual doctorate)***:** | | |  | | | | |
| **Name of doctoral study programme at partner institution** *(in case of dual doctorate)***:** | | |  | | | | |
| **Area / field / branch** *(if the doctoral study programme is performed within a branch)***:** | | |  | | | | |
| **INFORMATION ON THE DOCTORAL THESIS** | | | | | | | |
| **Thesis language** | | |  | | | | |
| **Thesis title:** | *In the language of the thesis* | |  | | | | |
| *In Croatian* | |  | | | | |
| *In English* | |  | | | | |
| **MENTOR(S)** | | | | | | | |
|  | | | **Full name, title:** | | **Institution, country:** | | |
| **Mentor:** | | |  | |  | | |
| **Mentor:** | | |  | |  | | |
| **THESIS EVALUATION COMMITTEE** | | | | | | | |
| **Appointed Thesis Evaluation Committee[[2]](#footnote-2):** | | | **Full name, title:** | | **Institution, country:** | | |
| 1. | |  | | |
| 2. | |  | | |
| 3. | |  | | |
| 4. | |  | | |
| 5. | |  | | |
| 6. | |  | | |
| 7. | |  | | |
| **Session of the competent body and agenda item within which the Committee was appointed:** | | |  | | | | |
| **DOCTORAL THESIS EVALUATION** | | | | | | | |
| **Thesis form:** | | | | monograph  Scandinavian model  artistic work | | | |
| **Thesis is evaluated:** | | | | for the first time | | after revision | |
| **Thesis should be:** | | | | accepted  revised  rejected | | | |
| **Explanation for the above opinion** *(specifying original scientific or artistic contribution and new discovery)***:** | | | | | | | |
|  | | | | | | | |
| **Opinion and proposal:** | | | | | | | |
|  | | | | | | | |
| **Separate opinion** *(only if a member of the Thesis Evaluation Committee has a separate opinion)***:** | | | | | | | |
| Signature  *(full name of Committee member)* | | | | | | | |
| **Additional comments** *(optional)* | | | | | | | |
|  | | | | | | | |
| **Signatures of Thesis Evaluation Committee members[[3]](#footnote-3)** | | **Full name, title, institution, country** | | | | | **Signature** |
| 1.  *(Chair of the Committee)* | | | | |  |
| 2. | | | | |  |
| 3. | | | | |  |
| 4. | | | | |  |
| 5. | | | | |  |
| 6. | | | | |  |
| 7. | | | | |  |
| In , on  *(place and date)* | | | | | | | |

1. Forward the completed and signed DR.10 form to the appropriate Student Office in digital and print format. [↑](#footnote-ref-1)
2. Committee members 6 and 7 only in case of a dual doctorate [↑](#footnote-ref-2)
3. Committee members 6 and 7 only in case of a dual doctorate. [↑](#footnote-ref-3)