## In the name of God



	Examiners	Examiners' Report: PhD Dissertation/MA/MS Thesis  PhD Candidate's/Student's Full Name:		
TŮ'	PhD Candidate's/Studer			
Wi.	Date:	Email:		
Lorestan Univ	rersity			
Dissertation/ Thesis Title				
Discipline/Majo	r	Academic orientation/ sub-field/Minor		
This is to confirm that subsequent to the PhD Candidate's/MA/MS student's thesis presentation, the jury evaluated, deliberated, and ranked the dissertation/thesis as:  Excellent □ Very Good □ Good □ Not Acceptable □				
Jury	Full name	Academic position	Signature	
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Supervisor				
Advisor				
Advisor				
Examiner				
Examiner				
Examiner				
Signature				
Representative of	Full Name	Position	Signature	
Postgraduate Studies				