

# Registrar's Office

## Master's Thesis Evaluation

Student's Personal Information	
Matriculation N°	
Family Name	
First Name	
Major	
Academic Advisor	

Master's Thesis Evaluation	
Thesis Grade (1.00, 1.33, 1.67, ..., 4.00 or 5.00)	
Short written assessment of the thesis:	

Examiner's Signature		
I hereby submit the Master's Thesis grade for the above-named student.		
Date	Name	Signature

**Please note:** A copy of your evaluation will be sent to the Dean of SHSS.