

**Shazand School of Nursing**

**Declaration of Readiness for Final Defense of PhD/Master’s Thesis and Appointment of Examiners**

**Form No. 1**

Dear President / Deputy of Education and Research, Faculty of Nursing, Shazand, Respectfully, I, ..................................., PhD/Master’s student in the field of ..........................., hereby declare my readiness for the final defense of my thesis entitled:

......................................................................................................................

Date and Student’s Signature

**Approval by Supervisor and Advisors**

The thesis of the student ................................ with the above-mentioned specifications, whose preparation stages have been completed under our supervision/advising, has been thoroughly studied and reviewed. Its deficiencies and errors have been corrected, and it is ready for the defense session.

Supervisor’s Full Name: Date and Signature:

First Advisor’s Full Name: Date and Signature

Second Advisor’s Full Name: Date and Signature:

**The Dear Head of the Department of .......................**

Considering the above-mentioned matters, kindly proceed with the appointment of the proposed examiners for submission and approval by the Faculty’s Educational/Research Council.

Dean / Deputy of Education and Research, Faculty

 Date and Signature

 Dear student, after referring to the Faculty Secretariat, please submit a copy to the Graduate Studies Office of the Faculty of Nursing, Shazand, to receive Form No. 2.



**Shazand School of Nursing**

**Declaration of Readiness for Final Defense of Master’s Thesis and Appointment of Examiners**

**Form No. 1**

**Dean / Deputy of Education and Research, Faculty**

Respectfully, the proposed examiners from the Department of ....................................... are hereby submitted for approval by the Faculty’s Educational and Research Council, in order to hold the thesis defense session for the PhD/Master’s student Mr./Ms …………………………. under the supervision of.............................................................................., with the thesis title:
........................................................................................................................................................................

The proposed examiners are as follows:
1 –
2 –

Department Head
Date and Signature

**Dear Education Officer / Dear Research Manager Faculty of Nursing**

In light of the student’s declaration of readiness for defense and the approval of the supervisor and advisors, this is respectfully submitted for consideration by the Faculty’s Educational and Research Council for the appointment of examiners.

Dean / Deputy of Education and Research, Faculty

 Date and Signature

 **Opinion of the Faculty Educational / Research Council**

Based on Clause ............. of the resolution of the Faculty Educational / Research Council dated \_\_ / \_\_ / \_\_, the examiners for the thesis of the student: ............................................ have been appointed as follows:

1 –

2 –

**Education Department Approval**

* 1. Completion of all required coursework
* 2. Verification of academic duration
* 3. Verification of semester grade point averages and final cumulative GPA
* 4. Final approval from the supervisor and advisors
* 5. Report form of advisory meetings with the supervisor
* 6. Approval form for submission of progress reports
* 7. Certificate of acceptance or publication of an article in a reputable journal (article approval form signed by the supervisor) or certificate of waiver from article grading
* 8. Certificate of completion of the referencing workshop (Date: \_\_\_\_\_\_\_\_\_\_)
* 9. Certificate of completion of the qualitative research methods workshop (Date: \_\_\_\_\_\_\_\_\_\_)
* 10. Certificate of completion of the advanced research methods workshop (Date: \_\_\_\_\_\_\_\_\_\_)
* 11. Certificate of completion of the academic writing article (Date: \_\_\_\_\_\_\_\_\_\_)
* 12. Certificate of completion of the advanced literature search workshop (Date: \_\_\_\_\_\_\_\_\_\_)
* 13. Review form of the esteemed examiners for the final thesis defense along with related approvals

The student’s academic file has been reviewed in accordance with educational rules and regulations as outlined above, and there is no objection to the defense of their thesis.

Graduate Education Officer

 Signature and Date

**Copy: Archive Unit Faculty of Nursing, Shazand, for inclusion in the student’s file**