

## **PRESENTATION EVALUATION SHEET**

## For 18 years Degree Program

Proposal	Thesis
Student Name:	Evaluator's Name:
Student I.D:	Date:
Topic:	
Comments/Observations	s of the Evaluator:
<b>Recommendations:</b>	
Approved Without Changes	
Approved With Changes	
If approved with change be Re-Submitted in	s, maximum time within which the Research needs to days/week(s).
Rejected	
	  Evaluator's Signature