

**PhD student / Clinical PhD student**

Academic degree, surname, first name:

PhD / Clinical PhD programme

Supervisor

1<sup>st</sup> Member2<sup>nd</sup> Member

additional Member

Start of PhD thesis

Matrikelnummer

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**Q794440202 - PhD****Q794445202 - Clinical PhD****MEDIZINISCHE  
UNIVERSITÄT**  
INNSBRUCK

EINGEGANGEN am:

Stempel - Abteilung Internationale Beziehungen -  
International Relations - PhD School*Kopie des genehmigten Records ergeht  
am:**an den/die Programmkoordinator/-in und  
an die/den Studierende/-n***Record of PhD Thesis Committee Meetings**

Protocol: The results of the meeting have to be documented. Particularly, it has to be indicated whether the candidate's progress is adequate to complete the thesis in due course. Any major changes, specific actions, milestones, deadlines, etc. discussed in the meeting need to be described. The protocol has to be signed by the PhD student, the supervisor and the committee members and submitted within 14 days to the Department of International Relations - PhD School or phd-studien@i-med.ac.at for approval by the Vice Rector for Teaching and Study Matters.

**Final PhD Thesis committee meeting**

Date: \_\_\_\_\_

Protocol: \_\_\_\_\_

additional pages may be attached when necessary

The electronic version of the doctoral thesis was approved by the Director of Clinical PhD Studies on:

\_\_\_\_\_  
Signature Director of Clinical PhD Studies

Overall assessment:

*Thesis goals and requirements achieved; ready for submission.*

Committee members: YES NO

PhD student: YES NO

*Publication with PhD student as first author has been published or is in press.* YES NO

(\* if NO, thesis committee please provide written explanation to be submitted with thesis; in English)

Signatures:

.....  
student.....  
supervisor.....  
1<sup>st</sup> member.....  
2<sup>nd</sup> member.....  
additional member

Approved by the Vice Rector for Teaching and Study Matters

YES

NO

Date

ao. Univ.-Prof. Dr. med. univ. Wolfgang Prodingner, MME (Bern), Vice Rector for Teaching and Study Matters

**Proposed thesis reviewers:**

Internal / Organization: .....

External / Organization: .....

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**Proposed examiners for final defense:**

Chairperson / Organization:.....

Examiner / Organization:.....

Examiner / Organization: .....

Examiner / Organization:.....

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**Coordinator's approval of submission:**

YES

NO

**- all course requirements according to the curriculum  
(Studienplan) have been achieved**

Date: .....

**Coordinator:**

.....  
*programme*

.....  
*name*

.....  
*signature*

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**Signatures:**

.....  
*student*

.....  
*supervisor*

.....  
*1<sup>st</sup> member*

.....  
*2<sup>nd</sup> member*

.....  
*additional member*

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**To be completed by the clerk:**

YES

NO

.....  
Name

.....  
Date

.....  
signature

Acceptance by Vice Rector for Teaching and Study Matters

YES

NO