

NATIONAL TEXTILE UNIVERSITY
OFFICE OF GRADUATE STUDIES & RESEARCH



External Examiner Report on Dissertation for MS Degree

Name of Student: _____

Registration No.: _____ Program: _____

Title of the Thesis: _____

Name of Thesis Supervisor: _____

1 Overall academic merit of the dissertation (Structure & composition, content, methodology and implications of the scientific research)

2 Recommendation

Accepted

Accepted with minor revision

Accepted with major revisions

Rejected

* Supervisor will be responsible for incorporation of revision

Comments:

External Examiner

Name: _____

Signature

Designation: _____

Date

Organization: _____

Stamp