**Doctoral Thesis Oral Credentials**

*Institute of Information System and Application, NTHU*

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| --- | --- |
| Date of Application | / / (yyyy/mm/dd) |
| PhD Candidate |  |
| Comments and Signatures | * Please check if candidate comply with the relevant provisions of this graduate of the doctoral * Please check whether candidate’s research quality meet the graduation requirement |
| Yes No (Shall attach specific facts)  Comments:  Committee members’ signatures: |

