Date Klik her for at angive en dato.

Please delete the guiding text marked with grey before handing in the recommendation.

**1. Preliminary recommendation**

To be completed in Danish *or* English. If the language of the thesis is English, the assessment should always be completed in English.

Suggested number of pages in total: 5 pages

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| --- |
| **A) Introduction**  Author:   * XXX   Title of thesis:   * XXX   Members of assesment comittee (with title and affiliation):   * XXX, XXX, XXX (Vælg et element.) * XXX, XXX, XXX * XXX, XXX, XXX   Principal supervisor (with title and affiliation):   * XXX, XXX, XXX   State if any of the supervisors participated in the assessment without voting right |
| **B) Information regarding the thesis**  Type of the thesis: (monograph/articles/combi)  Number of pages of thesis excluding appendices:  Number of pages of appendices:  If the thesis contains articles state title, author(s) and publication status  In case of co-authored articles, state the independent contribution to the articles of the PhD candidate. |
| **C) Summary of the contents of thesis**  Max 1 page |
| **D) Evaluation of the thesis**  Evaluation of *all* key elements of the thesis including (please include a section with each of the four points as headline):   * Research questions, design and methods * Theory and conceptualization * Analysis * Main contribution to research field   Include items for discussion at the defense  In case of an article-based thesis, both the qualities of the summary report and the individual articles should be evaluated. In case of non-published articles, the publishability of the articles should be assessed. |
| **E) Conclusion**  State if the thesis is:  1) recommended for oral defense, unanimous or divided. If the recommendation is divided, state the individual recommendations  2) recommended for resubmission in a revised version. State the deadline for resubmission (minimum 3 months)  3) not recommended for oral defense (and with that no resubmission) |

**Signature(s)**

1) If recommended for defense: As a minimum, signature from the chairperson *and* documentation of accept of the assessment from the other members of the assessment committee via e-mail.

2) If not recommended or by divided recommendation: Signatures from all members of the assessment committee

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| --- | --- | --- |
| **Date and signatures** | | |
| Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  XXX, Chair | Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  XXX | Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  XXX |

Following completion, the preliminary assessment must be sent to [aauphd@adm.aau.dk](mailto:aauphd@adm.aau.dk)

**2. Final recommendation**

To be completed and signed by all members of the assessment committee immediately after the defense

|  |  |  |
| --- | --- | --- |
| State if the decision is unanimous or divided. If the recommendation is divided, state the individual recommendations. | | |
| **Time and place of the defense:** | | |
| **Date and signatures** | | |
| Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_  XXX, Chair | Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  XXX | Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  XXX |