

FORM 4.5a Statement from evaluation committee for the trial lecture

**This form is to be used when the trial lecture is held on a different date than the public defence.**

**Complete the form digitally.**

**Please sign the statement after the trial lecture and deliver to the PhD coordinator at the Faculty.**

|  |  |  |  |
| --- | --- | --- | --- |
| **1.** | **PhD candidate:** | Full name | |
| **2.** | **Main supervisor:** | Full name | |
| **3.** | **Date of trial lecture:** | dd.mm.yyyy | |
| **4.** | **Internal committee:** | Member 1 (Name, title, affiliation)  Member 2 (Name, title, affiliation)  Member 3 (Name, title, affiliation) | |
| **5.** | **Evaluation of the trial lecture:** | | |
| **Norwegian title of trial lecture:** |  | |
| **English title of trial lecture:** |  | |
| **The trial lecture is:** | **Passed:** | **Not passed:** |
| **Comments on the content and the performance:** | Write here | |
| **6.** | **Conclusion: The Evaluation Committee approves the trial lecture.** | | |
| **Place: Date:**  **Signatures: *(Please use a blue pen)***  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Member 1)*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Member 2)*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Member 3)* | | |