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| Macintosh HD:Users:test:Documents:Bachelor of Technology:BT Programs:Logos:Technological_University_of_the_Philippines_Seal.svg.png | **TECHNOLOGICAL UNIVERSITY OF THE PHILIPPINES CAVITE CAMPUS**  Carlos Q. Trinidad Avenue, Salawag, Dasmariñas City, Cavite, Philippines  Telefax: (046) 416-4920  Email: cavite@tup.edu.ph │ Website: www.tup.edu.ph | |
| **DIT** | **RESEARCH TITLE DEFENSE FORM** | Page 1/1 |

Date: DateSub

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|  |  |  |  |  | Degree |
| Examinees/s | : |  | Student1 |  | Degree1 |
|  | : |  | Student2 |  | Degree2 |
|  | : |  | Student3 |  | Degree3 |
|  | : |  | Student4 |  | Degree4 |
|  | : |  | Student5 |  | Degree5 |

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| **Titles** | | **COMMENT:**  **(Accepted/Deferred/Revise title\*\*)** |
| **1** | **Title1** | **Comment1** |
| **2** | **Title2** | **Comment2** |
| **3** | **Title3** | **Comment3** |
| **4** | **Title4** | **Comment4** |
| **5** | **Title5** | **Comment5** |

**\*\*Suggested Title if Applicable** **SuggestedTitle**

**This is to certify the authenticity of the above evaluation of the panel of examiners whose signatures are herewith affixed.**

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| Live Signature Required |

**PanelChairman**

**Panel Chairman**

(Signature over printed name)

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| Live Signature Required3 |

PANEL:

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| Live Signature Required2 |

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| P1 |  | P2 |  | P3 |
| (Signature over printed name) |  | (Signature over printed name) |  | (Signature over printed name) |

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| Live Signature Required4 |

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| P4 |  |  |  |  |
| (Signature over printed name) |  | (Signature over printed name) |  | (Signature over printed name) |

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This report on the Title defense for a thesis is hereby accepted.