Results of Dissertation Examination

(Return within 24 hours of scheduled time to the Director of Graduate Studies regardless of whether examination is held or corrections are to be made.)

STUDENT_____ DATE OF EXAMINATION_____

I participated in the final dissertation examination of this student as scheduled and report my evaluation of the results as follows: (committee members must sign in person at the conclusion of the examination.)

_____ _____
Passed Failed

_____
Committee Chair
_____
_____
_____
_____
_____

Dissertation Title:
_____
_____
_____

NOTE: No examination is to be given without all committee members present. Additional requirements for research doctorates include acceptance by the Dean of the Graduate College of dissertation bearing original signatures of at least all but one Committee member. (No more than one may be in dissent for degree to be recommended.)

_____ _____
Approved-Director of Graduate Studies Date

_____ _____
Accepted-Dean of Graduate College Date