Final Oral Defense of the Doctoral Dissertation

Full Legal Name:

__________________________________________________________

Title of Dissertation:

__________________________________________________________

The signatures below verify that this student has defended the Doctoral Dissertation submitted to the Committee and has received an evaluation of:

_____ Pass - This evaluation will be given to a student if the defense is satisfactory and if there are only typographical or format changes to be made to the document.

_____ Pass with Minor Revisions – This evaluation will be given to a student when the oral defense is satisfactory but there are some corrections that need to be made of an editorial nature or that are otherwise so minor that the Committee members do not need to reconvene to discuss the corrected version of the dissertation with the student.

_____ Pass with Major Revisions – This evaluation will be given to a student when the oral defense is satisfactory but there need to be substantial additions or changes in the dissertation that would require another meeting of the Committee to discuss the revisions.

_____ Fail – This evaluation will be given to a student if, based on Committee consensus, the oral defense was completely unsatisfactory or the dissertation as presented failed to achieve the standards of scholarship expected, which could not be remedied by a revision.

Committee Chair ___________________________________________ Date

Committee Member ___________________________________________ Date

Committee Member ___________________________________________ Date

Students should submit this form to the Program Coordinator immediately after oral defense.

2012-2013