



## REPORT ON FINAL EXAMINATION FOR THE Ph.D. DEGREE

**STUDENT**

Please complete the student section and give this form to your Doctoral Committee. Submit this form along with your dissertation to the Graduate Division Office.

<b>LAST NAME</b>	<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>STUDENT ID#</b>
<b>ADDRESS</b>	<b>CITY</b>	<b>STATE/ZIP CODE</b>	<b>PHONE NUMBER</b>
<b>MAJOR</b>	<b>E-MAIL ADDRESS</b>		

Name of Degree: Ph.D. in \_\_\_\_\_

Title of Dissertation: \_\_\_\_\_

Language Requirement (if applicable) \_\_\_\_\_ Date Passed \_\_\_\_\_

**DOCTORAL COMMITTEE**

It is the responsibility of the committee to make an evaluation of the student's overall performance. Please complete this section and have the student file this form with the Graduate Division.

Date of Dissertation Defense: \_\_\_\_\_

**DECISION:** Please indicate the Committee's decision (check one):     Favorable                       Unfavorable

Favorable pending the following change(s):

If the vote of the Committee is **Unfavorable**, please explain:

**LIST NAMES OF ALL COMMITTEE MEMBERS:**

<u>Print Name</u>	<u>Academic Unit</u>	<u>Signature</u>	<u>Date</u>
Committee Chair	_____	_____	_____
Committee Member	_____	_____	_____
Committee Member	_____	_____	_____
Committee Member (4 <sup>th</sup> member is optional)	_____	_____	_____

**SCHOOL**

It is the responsibility of the student to obtain the appropriate signatures.

**School Approvals:**

Graduate Advisor:    PRINT \_\_\_\_\_                      SIGN \_\_\_\_\_                      Date \_\_\_\_\_

Graduate Group Chair: PRINT \_\_\_\_\_                      SIGN \_\_\_\_\_                      Date \_\_\_\_\_

**GRADUATE DIVISION Use Only:**

Requirements fulfilled:     Advanced to Candidacy     Residency     Dissertation Approved     Language (if applicable)

Conferred     Denied                      Degree Conferred for:     Fall     Spring     Summer                      Year \_\_\_\_\_

Graduate Division Dean Signature: \_\_\_\_\_                      Date: \_\_\_\_\_