

PHD DISSERTATION DEFENSE FORM

The Faculty Advisor will complete this form after the student has defended their dissertation. The Faculty Advisor will obtain the signatures of individual committee members and will return the signed form to the Office of Student and Academic Services via email at cph@unthsc.edu.

Date Submitted:

Student Name:

Student ID Number:

UNTHSC Email Address:

Dissertation Information:

Dissertation Title:

Date of Presentation:

Decision of the Committee:

Pass

Pass with Minor Revisions

Fail

The candidate must be provided with a description of the required changes or corrections. Signatures below indicate that you agree with the decision made by the committee and the decision must be unanimous. If revisions are needed, the MS/PhD Program Director will notify the Office of Academic Services via email when all revisions are made and approved. If the proposal defense is adjourned with a decision of "Fail", attach a summary regarding the circumstances and recommended actions. A decision of failure will result in an unsatisfactory annual review.

Faculty Advisor Signature: _____

Committee Member Signature: _____

Committee Member Signature: _____

Committee Member Signature: _____

Committee Member Signature: _____

MS/PhD Program Director Signature: _____