

THESIS DEFENSE REPORT FORM

Defense Date: _____

Banner ID: _____

Student: _____

Department: _____

Mentor(s): _____

Dissertation Title:

The decision of the Thesis Defense Committee for the above named student may be:

P: 'Pass' on the question of recommendation for the Ph.D. degree, the dissertation being accepted subject only to minor revision, if any.

CP: 'Conditional Pass' on the scientific merit of the Thesis Defense and the Dissertation, but with substantial revisions. *If someone other than the Mentor, such as the Defense Committee Chair or any other member of the Thesis Defense Committee, is required to review and approve the revised Thesis, the grade must be a 'conditional pass.'* All conditions set by the Thesis Defense Committee must be satisfied within a period of two months of the date of the examination.

The candidate will be recommended for the Ph.D. degree upon satisfactory completion of the revisions outlined in a formal memo as certified by the Thesis Defense Committee Chair or by the Subcommittee whose names are circled below. Copies of this memo along with the original Thesis Defense Report form must be submitted to the Graduate Office, the Student, and the Mentor as soon as possible after the *conditional pass* is given.

F: 'Fail' on the question of recommendation for the Ph.D. degree. A memo from the Thesis Defense Committee should accompany this report stating the reasons for the failure and a recommendation to the appropriate departmental chairperson whether a re-examination is warranted.

Committee Member	Decision			Signature
	P	CP	F	
(Chair)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Immediately after the oral defense, please hand-deliver the original of this form to the Graduate Office - Belfer 202 and a copy to the Chairperson of the Student's Department.