

Department of Health Promotion, Education, and Behavior Doctoral Dissertation Defense Notification Form

To be completed for each student defending his/her dissertation proposal or final dissertation

Name of Student: _____

VIP ID : _____

Dissertation Title: _____

Type of Defense (check one): Dissertation Proposal Defense _____ Final Dissertation Defense _____

Result of Defense (check one): Pass _____ Conditional Pass _____ Fail _____

Date of Defense: _____

Approval of Document, i.e., Proposal or Dissertation (check if approved): _____

Date of Approval of Document: _____ Comments or Conditions: _____

Examining Committee

This form must be signed by the major professor and all committee members attesting to the result of the defense and approval of the final dissertation proposal or final dissertation document.

Major Professor Signature

Type or print name

Committee Member Signature

Type or print name

Committee Member Signature

Type or print name

Outside Committee Member Signature

Type or print name

Committee Member Signature (if necessary)

Type or print name

HPEB Graduate Director

Date

Note: If the result of the defense is a conditional pass, the conditions must be specified in writing. Furthermore, committee members should not sign the form until they are satisfied the conditions are met or if they wish to delegate responsibility for that to the major professor. For the student to graduate, a final form should be submitted indicating "Pass", with all committee members' signatures.