

THESIS/DISSERTATION DEFENSE REPORT

GS-TD-7 (REV. 11/1/12)



NAME	STUDENT ID
EMAIL	TELEPHONE NUMBER
DEGREE (<i>Ph.D., M.S., M.A., M.Ed., etc.</i>)	MAJOR (<i>English, Physics, Geology, etc.</i>)

THESIS/DISSERTATION DEFENSE INFORMATION: (A separate Comprehensive Exam Report form must be submitted if the Thesis/Dissertation defense is combined with the comprehensive exam.)

THESIS/DISSERTATION TITLE _____

DATE OF DEFENSE: _____ Pass Conditional Pass** Fail

****CONDITIONAL PASS:** Please state requirements for passing. When conditions have been met, a new Thesis/Dissertation Defense Report form should be submitted which indicates "PASS."

OUTSIDE EXAMINER

NOTE: ALL PH.D. ORAL EXAMS MUST HAVE AN OUTSIDE EXAMINER PRESENT AT THE EXAM. A REQUEST FOR OUTSIDE EXAMINER SHOULD BE SUBMITTED TO THE GRADUATE SCHOOL AT LEAST 10 WORKING DAYS PRIOR TO THE EXAM (15 DAYS IF SCHEDULED DURING THE SUMMER BREAK).

OUTSIDE EXAMINER'S SIGNATURE	PRINT NAME LEGIBLY	DATE
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APPROVED BY

COMMITTEE SIGNATURE <input type="radio"/> Chair or <input type="radio"/> Co-Chair	PRINT NAME LEGIBLY	DATE
COMMITTEE SIGNATURE <input type="radio"/> Member or <input type="radio"/> Co-Chair	PRINT NAME LEGIBLY	DATE
COMMITTEE MEMBER'S SIGNATURE	PRINT NAME LEGIBLY	DATE
COMMITTEE MEMBER'S SIGNATURE	PRINT NAME LEGIBLY	DATE
COMMITTEE MEMBER'S SIGNATURE	PRINT NAME LEGIBLY	DATE
DEPARTMENT CHAIR'S SIGNATURE	PRINT NAME LEGIBLY	DATE
COLLEGE/SCHOOL DEAN'S SIGNATURE	PRINT NAME LEGIBLY	DATE

ORIGINAL SIGNED FORM SHOULD BE SUBMITTED TO THE GRADUATE SCHOOL AFTER ALL OTHER SIGNATURES ARE COMPLETE

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