

REPORT ON DOCTORAL DEGREE FINAL DEFENSE

REGISTRATION IN AN ACADEMIC QUARTER OR FILING LEAVE OF ABSENCE IS REQUIRED

THE QUARTER OF DISSERTATION/DMA SUPPORTING DEFENSE OR WAIVER

A copy of the processed form will be sent via email to the student and department

Name: _____ Perm: _____ Degree/Major: _____

UMail: _____ Registered or Filing LOA _____
Quarter & Year

Student Signature

Date

The above student's final defense was: Public Waived

On _____ the committee reports the candidate's final defense results as follows:
mm/dd/yy

Member Name <i>(type or print)</i>	Signature	Passed/Waived	
		Yes	No
_____	_____	<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"/>

The committee therefore recommends that the degree be: Conferred Denied

Committee Chair: _____
Type or Print Name *Signature* *Date*

The above candidate has met all the requirements of the major department and those of the Graduate Division.

I concur with the recommendation of the department and doctoral committee. The degree of

Doctor of: *Philosophy* or *Musical Arts* in _____ *will be conferred* _____.

Dean of the Graduate Division: _____ **Date:** _____