

PhD Dissertation Acceptance Form

The dissertation oral defense committee acknowledges that they have completed their review of the candidate's dissertation, have heard the candidate's oral defense of that dissertation, and are registering their vote of pass or fail for this dissertation and its defense.

Student name:	Ph.D. Program name:	
E-mail address:	Student ID#:	
Dissertation Title:		
Oral defense date:	Oral defense location:	
To be completed by the Oral Defense Comminor edits of the dissertation are completed.	<u>umittee</u> . The Committee Chair is responsible for en	suring that any required
minor curts of the dissertation are comple	ted by the student.	Choose one:
Committee chair:	Cimpatour	O Pass
Committee chair:	Signature:	O Pass
Committee member:	Signature:	○
Constitution and have		Pass
Committee member:	Signature:	
Committee member:	Signature:	○
		Pass
Committee member:	Signature:	
Committee member:	Signature:	O Pass Fail
To be completed by the program Ph.D. co	ordinator:	
Received by:	Signatu <u>re:</u>	
~ Note that more than a single dissenting	vote means that the student fails their dissertatio	n oral defense.
Passing votes (#):		
Failing Votes (#):		
Examination Outcome: O Pas	s	

The completed GS9 returned to Program Coordinator who must submit to the Office of the Registrar (addarioj@erau.edu and brantlek@erau.edu with cc: grantch@erau.edu)