Record of Dissertation and Oral Examination
Requirements for Doctoral Degree Candidate

Name: _____ PID:_____

Department: _____

Major Code: _____ Program: _____

Dissertation Title:

Dissertation has been: ☐ Accepted ☐ Rejected ☐ Accepted subject to revisions required by Committee (beyond minor editorial changes)

Oral examination in defense of dissertation conducted on: Date: _____

The student ☐ Passed

☐ Failed - Reason:

Dissenting opinions and names of dissenting examiners, if any:

Subject to the satisfactory completion of other requirements, this student is recommended for the degree of Doctor of:

☐ Philosophy ☐ Education

Chair: _____ _____ _____

Committee Members' Names: _____ _____

_____ _____

Major revisions, if any:

Final Approvals:

Revisions, if any, approved:

Chair of Dissertation Committee: _____ _____

Department Chairperson: _____ _____

Submit approved form to the Graduate Records Office, edacadaf@msu.edu or 204 Erickson Hall.

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