Ph.D. Thesis Committee Report

Thesis Committee Meeting Date: _________________

Student Name: ________________________________________________________________

Thesis Mentor: ________________________________________________________________

Committee Members:
Print Name (Chair): ___________________________  Print Name: ___________________________
Print Name: ___________________________  Print Name: ___________________________
Print Name: ___________________________  Print Name: ___________________________

The chairperson of the thesis committee should write a brief paragraph in the space below evaluating the student following the thesis committee meeting. Both the student and the mentor should sign in the spaces provided after reviewing the paragraph. The student should submit the completed form to the Ph.D. Education Coordinator at W313, NRB.

Student Signature: _______________________________
Mentor Signature: _______________________________
Chair Signature: _______________________________