

ORAL DEFENSE
GRADUATE SCHOOL
SOUTHERN ILLINOIS UNIVERSITY

An evaluation of Eligibility for the _____ degree in _____
as reported by members of the final examination committee.

Name of Student ID Number

1. Evaluation of Oral Defense of: Dissertation
 Thesis
 Research Report

Title: _____

2. Members of the examining committee and their evaluation of the oral defense:

Recommended

| Pass Yes | Pass No | Name (print or type) | Signature | Check if Chair or Co-Chair |
|--------------------------|--------------------------|-------------------------|-----------|----------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ | <input type="checkbox"/> |
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DATE _____