

**Thesis/Dissertation Defense**  
**College of Humanities and Social Sciences**

4-12-05

Date: \_\_\_\_\_

Department: \_\_\_\_\_

Student's Name: \_\_\_\_\_

SamID: \_\_\_\_\_

Graduating Semester: \_\_\_\_\_

A Thesis/Dissertation Defense was administered on \_\_\_\_\_, 200\_\_, at  
Date

\_\_\_\_\_  
Time

The examining committee consisted of the following members:

Printed Name	Signature
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Title: \_\_\_\_\_

Grading on Thesis/Dissertation Defense: \_\_\_\_\_  
(Please list results of Thesis/Dissertation Defense)

\_\_\_\_\_  
Graduate Advisor Date

\_\_\_\_\_  
Department Chair Date

\_\_\_\_\_  
Dean, College of Humanities and Social Sciences Date