

FLORIDA STATE UNIVERSITY  
OFFICE OF GRADUATE STUDIES

OUTSIDE COMMITTEE MEMBER  
DISSERTATION DEFENSE REPORT

Thank you for serving as the Representative-at-Large on the doctoral committee for the student whose name appears below. Please use this form to file a brief report with the Dean of Graduate Studies and the student's College/School on the student's defense. The Office of Graduate Studies asks for the report one week from the defense date; however, please file your report even if the deadline has passed. Send the report to the Office of Graduate Studies, 408 Westcott, Mail Code: 1410. Thank you for your cooperation.

Please print or type

Student's Name: \_\_\_\_\_ Date of Defense: \_\_\_\_\_

Student's Department or Program: \_\_\_\_\_

Title of the Dissertation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Major Professor's Name: \_\_\_\_\_

Outside Member's Name: \_\_\_\_\_

Outside Member's Department or Program: \_\_\_\_\_ MC: \_\_\_\_\_

A brief critique of the dissertation defense is required:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NOTE: If you respond No to any of the following questions, please elaborate below or on the back of this form:

	YES	NO
Did the student successfully defend the dissertation?	_____	_____
Were all committee members present?	_____	_____
Was the draft submitted to members 4 weeks in advance?	_____	_____
Was the defense conducted properly?	_____	_____

Signature below indicates that upon completion of the dissertation, the student was able to communicate, both orally and in writing, the knowledge and skills he/she has acquired within the discipline.

Your Signature: \_\_\_\_\_ Date: \_\_\_\_\_