



Dissertation Defense Report Form

Submit the completed form to The Graduate College at gcdegspcl@txstate.edu. It is the student's responsibility to make sure The Graduate College receives this form in a timely manner. Failure to submit the form prior to submitting the completed dissertation to Vireo could delay graduation.

Student Name: _____	Texas State ID: _____
Major: _____	Degree (check one): <input type="checkbox"/> Ph.D. <input type="checkbox"/> Ed.D.
Student Signature: _____	Date: _____

Date of Defense: _____	Date of Report: _____	
Results of Dissertation Defense: <input type="checkbox"/> Pass <input type="checkbox"/> Pass with Revisions	OR	<input type="checkbox"/> Fail
The student has completed the required number of dissertation hours. <input type="checkbox"/> Yes		

Committee Members: approval of the dissertation does not require approval from all committee members; one committee member (who is not the chair/co-chairs) can dissent. Your signature below represents an acknowledgement of, rather than an agreement with, the committee's verdict. All committee members must sign this form.

Printed Name of Committee Chair/Co-Chairs	Department	Signature	Date
_____	_____	_____	_____
_____	_____	_____	_____

Printed Name of Committee Members	Department	Signature	Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signatures below indicate the departmental approval of the above recommendation:

Printed Name	Signature	Date
_____	_____	_____
Doctoral Program Director	_____	_____
_____	_____	_____
Department Chair	_____	_____