

Name: _____ UID: _____ Date: _____
 BS Degree: _____ Address: _____
 MS Degree: _____ City, Zip: _____
 Admitted: _____ Phone: _____
 Graduation Semester: _____ Number of credits this semester: _____

Scheduling a final defense:

1. Once your dissertation is reviewed and edited by your chairperson and the final draft is approved, provide your dissertation to your entire committee along with a Dissertation Evaluation Form for each member's signature.
2. Coordinate a defense day/time with each committee member. (must be 2-3 weeks after they received your final draft). Check conference room availability.
3. Once the date is confirmed, schedule the conference room with the Advisor (2-3 weeks prior), and submit the Dissertation Announcement <http://www.civil.utah.edu/thesis/dissertation/announcement>.
4. Return committee signed Evaluation Forms (page 2) no less than **5 working days** before the defense or it will be rescheduled.
5. Take this form to your final defense, get committee signatures, and return to the Academic Advisor **within 3 working days** of the final defense.

The student presented orally their research during their dissertation defense on _____.

The results are as follows:

- Passed with only minor corrections.
- Failed. Student will need to be registered for 3 credits the semester they redefend.

| Committee | Name | Signature | Date |
|----------------------------------|-------|-----------|-------|
| Chair | _____ | _____ | _____ |
| 2 | _____ | _____ | _____ |
| 3 | _____ | _____ | _____ |
| 4 | _____ | _____ | _____ |
| 5 | _____ | _____ | _____ |
| 6-Optional: | _____ | _____ | _____ |
| Director: | _____ | _____ | _____ |
| Graduate Studies Director: | _____ | _____ | _____ |

DISSERTATION/THESIS EVALUATION FORM

Give a copy of this form to each committee member no less than 2-3 weeks prior to the defense with the dissertation. Dissertation needs to be evaluated and form signed by EACH committee member. Each signed form must be submitted to the Department's Graduate Advisor a minimum of 5 working days prior to the final oral exam or the defense must be rescheduled to accommodate the minimum 5 working days.

Dissertation given to committee: _____

Student Name: _____

Proposed Exam Date and Time: _____

Graduate Committee:

Signature

- | | | |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |
| 5. | _____ | _____ |
| 6. | _____ | _____ |

This evaluation: (1) enables the Department to alert the dissertation/thesis chair of potential problems before the defense, (2) assists committee members in recognizing common and diverging concerns in planning the defense, and (3) serves as a record of the committee's evaluation.

Please check mark as appropriate:

Acceptable ^φ

- As Submitted
- After Minor Typographical and Stylistic Corrections
- After Minor Substantive Changes
- After Substantive Changes

Unacceptable

- Incomplete (e.g., discussion, conclusions missing)
- May be Acceptable with Major Revisions
- Critically Flawed

^φ By marking "Acceptable" and signing this form, the committee member is only certifying that they have read and critiqued the dissertation/thesis and that it is ready to defend. They are not guaranteeing that the candidate will pass the oral exam.