



# Completion of Final Oral Exam for Doctorate

Completed when a student successfully completes the final oral examination for the doctoral degree

Research & Graduate Studies  
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To: \_\_\_\_\_ From: \_\_\_\_\_

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Current Plan: \_\_\_\_\_ Admit Term: \_\_\_\_\_

Doctoral Degree: \_\_\_\_\_

Passed Defense with:  Honors (If applicable)  Satisfactory

Notice to departments: If student did not pass exam, please notify your School/College via email.

Committee Members (Number 5 serves as the University's outside member.)

	<u>Name</u>	<u>Status</u>	<u>Employee ID#</u>
(Chair)	_____	_____	_____
(2)	_____	_____	_____
(3)	_____	_____	_____
(4)	_____	_____	_____
(5)	_____	_____	_____

Chairperson Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Outside Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Comments:

### Department Signature

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

Departmental authorization: Department Chairperson / Director of Graduate Studies

### School/College Approval

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

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

Division authorization: School/College Dean Representative

Routing of form: Department → School/College → Registrar  
→ Office of Graduate Studies  
→ ISSS (if international student)