ORAL DEFENSE
GRADUATE SCHOOL
SOUTHERN ILLINOIS UNIVERSITY

An evaluation of Eligibility for the _____ degree in _____ as reported by members of the final examination committee.

_____ _____
Name of Student ID Number

1. Evaluation of Oral Defense of: ☐ Dissertation
☐ Thesis
☐ Research Report

Title: _____

_____

2. Members of the examining committee and their evaluation of the oral defense:

Recommended Pass Yes	Recommended Pass No	Name (print or type)	Signature	Check if Chair or Co-Chair
☐	☐	_____	_____	☐
☐	☐	_____	_____	☐
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☐	☐	_____	_____	☐

DATE _____