



PROPOSAL DEFENSE PANEL REPORT

DATE / TIME OF DEFENSE	AY / TERM		
SECTION A: PROGRAM INFORMATION		SECTION B: STUDENT INFORMATION	
COLLEGE OF	LAST NAME		
DEPARTMENT	FIRST NAME		
DEGREE / PROGRAM	MIDDLE NAME		
MAJOR / SPECIALIZATION	ID NO.		

SECTION C: THESIS / DISSERTATION INFORMATION

DEFENSE RESULT	For OUR use only ALPHA CODES	THESIS / DISSERTATION TITLE
<input type="checkbox"/> Passed	[4.0]	
<input type="checkbox"/> Unsatisfactory/Failed*	[0.0]	
* Failed defense means student has to restart thesis/dissertation cycle.		

SECTION D: THESIS / DISSERTATION PANEL

NAME	SIGNATURE
PANEL CHAIR	
MEMBER	
MEMBER	
MEMBER	
MEMBER	

SECTION E: DEPARTMENT

NAME	SIGNATURE
ADVISER	
DEPARTMENT CHAIR	

IMPORTANT : This Proposal Defense Panel Report must be accomplished in four (4) copies by the Chair of the Defense Panel and submitted immediately to the Office of the University Registrar. Distribution of the copies shall be: Front Desk of the Office of the University Registrar (2); the Department (1); and the Student (1).