**MGM Thesis Defense Summary**



Student Information: (student completes)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student Name: |  |  | **Meeting Date:** |  |
| **Dissertation Advisor:** |  |  | **Date of Last Committee Report:** |  |
| **Student Incoming Year**: |  |  |
| **Thesis Title:** |  | | | |

Thesis Committee Members: (student completes)

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

Meeting Synopsis:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Excellent (1.0) | Very Good | Good | Average | Satisfactory | Poor (6.0) |
| Oral presentation skills |  |  |  |  |  |  |
| General knowledge in thesis area |  |  |  |  |  |  |
| Written Document |  |  |  |  |  |  |

Summary of Thesis Defense and comments to be conveyed to the student:

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| --- | --- |
| Committee Member Name : |  |

***Please email the* completed *form or hand the paper copy to the student.***