

REPORT ON DOCTORAL DEGREE FINAL DEFENSE

**REGISTRATION IN AN ACADEMIC QUARTER OR FILING LEAVE OF ABSENCE IS REQUIRED
THE QUARTER OF DISSERTATION/DMA SUPPORTING DEFENSE OR WAIVER**

A copy of the processed form will be sent via email to the student and departments

Name: _____ Perm: _____ Degree/Major: _____

UMail: _____ Registered or Filing LOA _____
Quarter & Year

Student Signature *Date*

The above student's final defense was: Public Waived

On _____ the committee reports the candidate's final defense results as follows:
mm/dd/yy

Member Name <i>(type or print)</i>	Signature	Passed/Waived	
		Yes	No
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

The committee therefore recommends that the degree be: Conferred Denied

Committee Chair: _____
Type or Print Name *Signature* *Date*

The above candidate has met all the requirements of the Joint Doctoral Program and those of the UCSB Graduate Division. We concur with the recommendation of the joint doctoral program and doctoral committee. The degree of Doctor of Philosophy in _____ will be conferred _____.

JDP Director, Affiliated Institute: _____
Type or Print Name *Signature* *Date*

JDP Director, UCSB: _____
Type or Print Name *Signature* *Date*

Graduate Dean, Affiliated Institute: _____
Signature *Date*

Graduate Dean, UCSB: _____
Signature *Date*