## 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:   | U                     | CSB Perm:         | B Perm: Join       |                     | ıt ID:    |  |
|---|-----------------------|-------------------|--------------------|---------------------|-----------|--|
| UMail:  | Major:                | Jo                | oint University:   | Sacramento          | San Diego |  |
|   | Registered or         | Filing LO         | A                  |                     |           |  |
|   | C                     | C                 | Quarter / Year     |                     |           |  |
| Student Signature   | ?                     |                   | Date               |                     |           |  |
| The above student's final def   | ense was:             | Public            | Waived             |                     |           |  |
| On  | the committee         | reports the candi | date's final defen | se results as follo | ws:       |  |
| Member Name (type or print)   | Signatur              | ·e                |                    | Passed/             |           |  |
|   |                       |                   |                    | Yes                 | No<br>□   |  |
|   |                       |                   |                    |                     |           |  |
|   |                       |                   |                    |                     |           |  |
|   |                       |                   |                    |                     |           |  |
|   |                       |                   |                    | ⊔                   |           |  |
| Committee Chair:  Type or Print  The above candidate has met all  Division. We concur with the rece | the requirements of i | the Joint Doctord | ul Program and th  | nose of the UCSB    |           |  |
| Doctor of Philosophy in   |                       | will be co        | onferred           |                     |           |  |
| JDP Director, Affiliated Institute:  Type   | or Print Name         | Signature         |                    | Date                |           |  |
| JDP Director, UCSB:   | me                    | Signature         |                    | Date                |           |  |
| Graduate Dean, Affiliated Institute:  | gnature               |                   | Date               |                     |           |  |
| Graduate Dean, UCSB: Signature  |                       |                   | <br>Date           |                     |           |  |