

Student Name:

Student Access ID:

Student MS Department:

Title of Master's Thesis:

graduate faculty status.

defense.

Thesis Advisor

Result of UniCheck Review

NAME

Date of MS Thesis Defense:

FINAL REPORT:

MASTER'S THESIS PUBLIC LECTURE PRESENTATION – DEFENSE

INSTRUCTIONS: Please complete Part I of the form prior to the thesis defense and then Part II with appropriate signatures AFTER your thesis defense presentation. **Deadline to defend**: The last day of classes.

PART 1: Please identify your 3 person committee, at least 2 members must be from the student's home department with

TITLE/DEPARTMENT/COMPANY

A UniCheck plagiarism review must be completed by the Graduate Program Director at least one week prior to the

EMAIL

Graduate Program Director Signature

Prof. Shawn McElmurry 2158 Engineering Building s.mcelmurry@wayne.edu

Thesis Committee Signatures		Passed Defense	Failed Defense	Revisions Required
	Date			
Optional				

Submit the completed and signed form to the Graduate Program Director: