



RowanUniversity
GRADUATE SCHOOL OF
BIOMEDICAL SCIENCES

FINAL DISSERTATION DEFENSE REPORT – Master of Science Student

Candidate's Name: _____

Department: _____

Examination Date: _____

- The candidate passed the examination. Dissertation accepted as presented.
- The candidate passed the examination. Dissertation requires revisions to be approved by the:
 - advisor department chair advisory committee examination committee
- Dissertation requires additional experiments and written revisions. It must be approved by the:
 - advisor department chair advisory committee examination committee
- The candidate has failed the Final Examination.

We make the following recommendations:

Examination Committee:

Name (please print)	Signature	Concur	Dissent
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
Mentor/Committee Chair			
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Department Chair: _____ Date: _____

Senior Associate Dean: _____ Date: _____