

FLORIDA STATE UNIVERSITY • THE GRADUATE SCHOOL
UNIVERSITY REPRESENTATIVE DOCTORAL DEFENSE REPORT (Page 1 of 2)
(Please Type or Print)

Thank you for serving as the University Representative on the doctoral committee for the student whose name appears below. Use this form to complete a brief report on your student's dissertation/treatise defense. Failure to successfully complete this form, and submit it in a timely manner, will delay clearance of the student's manuscript for graduation.

The signed version of this form should be submitted to the Dean of The Graduate School via the Manuscript Clearance Advisor (clearance@fsu.edu) so that it is received no later than **ONE WEEK** from the successful completion of the student's defense, **OR** by the **FORMS DEADLINE, whichever is earliest.** A **COPY** of this form **MUST** also be sent to the defending student's academic dean/college. You are responsible for ensuring that a copy of this report is received by the student's academic dean/college.

<input type="checkbox"/> Graduate School
<input type="checkbox"/> Student's Academic Dean/College (Copy)

STUDENT INFORMATION:

NAME:

EMPLID:

DEFENSE DATE:

MANUSCRIPT TYPE: Dissertation Treatise

MANUSCRIPT TITLE:

COLLEGE:

DEPARTMENT/PROGRAM:

MAJOR (OR CO-MAJOR) PROFESSOR:

CO-MAJOR PROFESSOR (If Applicable):

UNIVERSITY REPRESENTATIVE INFORMATION:

NAME:

DEPARTMENT OR PROGRAM:

EMAIL ADDRESS:

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(Please Type or Print)

Student Last Name

Student EMPLID

EVALUATION: This section is to be completed only by the University Representative.

1) Did the student give a public presentation prior to the actual defense? **Yes** **No**

2) Were all members of the committee physically present in the room for the defense? **Yes** **No**

If **NO**, indicate who was absent and why. If voice or video connections were used to ensure participation, please explain in the "**Written Critique**" section.

Note: A valid defense requires the real-time participation of at least four faculty with GFS status, one of whom must be the University Representative. (For additional details, please see "Examination in Defense of Dissertation" in the Graduate Bulletin.)

3) Was the draft submitted to the committee members at least four weeks in advance of the defense? **Yes** **No**

If **NO**, explain in the "**Written Critique**" section.

4) Were any changes to the dissertation/treatise document requested? **Yes** **No**

If **YES**, please explain in the "**Written Critique**" section.

5) Indicate the grade for the defense: **PASS** **FAIL** **RE-EXAMINE**

Note: A grade of PASS for the defense should ONLY be assigned if minor corrections to the dissertation/treatise are needed. If the student cannot meet the 60-day deadline for submission of the final version to the Clearance Advisor in The Graduate School, then the assigned grade should be FAIL or RE-EXAMINE. The student must submit the final approved version to the Manuscript Clearance Advisor within 60 days of the defense, or re-examination by the committee is required. It would be best to postpone a defense date if there is concern that this deadline cannot be met.

WRITTEN CRITIQUE: This section is to be completed only by the University Representative. A written critique is required for all students. Do **NOT** leave this section blank. If more space is needed, please attach a document to this form. The Graduate School welcomes comments on what made the defense unique or distinct, as well as any problems or concerns about the defense.

APPROVAL: By signing below as the University Representative, you attest that all answers provided on this form are accurate and the defense was conducted according to University, college and departmental policies.

University Representative (Signature and Date)

University Representative (Print Name and Department)