

HIGH POINT UNIVERSITY
Norcross Graduate School

Thesis/Capstone/Dissertation Project Defense Evaluation

It is the responsibility of the Thesis/dissertation Chair to complete and deliver this form to the Graduate School on the day of or the day after the defense of the thesis/dissertation.

Student's Name _____

Degree Program _____

Title of Thesis/capstone/dissertation Project _____

Defense: Date _____

Time _____

Location _____

Committee's Evaluation of the Thesis/capstone/dissertation Project Defense

- Pass
- Fail (List Reason)

Approval Signatures

Committee Chair

Date

Committee Member

Date

Committee Member

Date