# **MS DEFENSE EXAM EVALUATION FORM ADVISOR’S REPORT**

Student Name:

Student Number:

Thesis Option  
**OR**Paper Option:

Committee Members Present:

Name (Chair):

Name:

Name:

Approved

Approved with revisions described

Not approved

Advisor’s Signature:

Date:

Paul Markowski:

Date:

Continuing on for PhD?

Resume Study Form Completed: