



# Minot State UNIVERSITY

## Graduate School

## THESIS OR PROJECT DEFENSE

**Completed by the Student:**

Student's Name \_\_\_\_\_

Program of Study \_\_\_\_\_

Date of Defense \_\_\_\_\_

Title of Thesis/Project \_\_\_\_\_

The candidate has  **PASSED**  **FAILED** his/her defense of the above named thesis

\_\_\_\_\_  
Signature, **Chairperson** of Graduate Committee

\_\_\_\_\_  
Signature, Member of Graduate Committee

\_\_\_\_\_  
Signature, Member of Graduate Committee

\_\_\_\_\_  
Signature, Graduate Faculty Member (Outside of Department/Division)

\_\_\_\_\_  
Signature, Department/Division Chairperson

\_\_\_\_\_  
Date

Dissenting Vote:

\_\_\_\_\_  
Signature, Member of Graduate Committee

\_\_\_\_\_  
Date