

## North Carolina Agricultural and Technical State University The Graduate College 120 Gibbs Hall (336) 285-2366

## **Results of Thesis/Dissertation FINAL ORAL DEFENSE**

Student Name			
Banner ID	nner IDStudent Email		
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DEPARTMENTAL APPR	OVAL ONLY		
	Results of Fin	al Oral Defense	
Passed the oral det	fense examination	Failed the oral defe	ense examination
Department Chairperson:	N IN	ar .	D.
	Printed Name	Signature	Date
Thesis/Dissertation Chairp	Printed Name	Signature	Date
Committee Member:	N . N	0'	D.
Committee Member:	Printed Name	Signature	Date
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Committee Member:	Printed Name	Signature	Date

\*This form must be submitted by the committee chair to the Graduate College within 24 hours from the date of the final oral examination.