

School of Engineering, Fairfield University
Master's Thesis Defense Report Form

Department: _____

This is to certify that _____
(Name of student) (ID #)

defended (his) /(her) MS Thesis titled _____

on _____
(Date)

The MS thesis, including the defense of the thesis, is deemed by the thesis defense committee to be:

_____ Acceptable

Please include any recommended changes to the text or format of the final version of the thesis.

_____ Not Acceptable

Please include the reasons for deeming the MS thesis not acceptable (use additional pages, if necessary)

The MS Thesis Advisor is responsible for ensuring the candidate completes the final version of the thesis with any recommended changes.

Thesis Advisor

(name) (signature)

Committee Member

(name) (signature)

Committee Member

(name) (signature)

Committee Member

(name) (signature)