

# Morningside Graduate School of Biomedical Sciences

#### THIS FORM IS FOR PREVIEW PURPOSES ONLY AND WILL NOT BE ACCEPTED FOR SUBMISSION.

#### PLEASE INITIATE FORM IN DOCUSIGN.

## FORM GSBS79: DISSERTATION DEFENSE OUTCOME

## Instructions

The student should provide the names of all committee members for this form, prior to the defense.

Committee members may sign at the defense, unless the DEC determines that questions about the outcome are significant enough to warrant delay.

The DEC Chair should sign the form only upon approval of the final revised versions of the thesis.

This form will not be accepted, and the student record will not be considered complete, unless all DEC members have signed and dated the form.

Student and Defense Details							
Student Name:							
Program:							
Date of Defense:							
Date Defense passed (Fi	nal Revised Thesis Accepted):						
Defense Participation: All Remote On-site - Room number:							
Signatures							
Role	Name	Remote	Onsite	Signature	Date		
Student							
Thesis Advisor							
Co-Thesis Advisor							
DEC Chair							
External Examiner							
DEC Member							
DEC Member							
DEC Member							
Program Director							
GSBS Dean							
GSBS Office Staff							