

**Regent University School of Education
Doctoral Dissertation Defense and Approval Form**

Doctoral Candidate _____ Date _____

Admission Semester _____

Projected Graduation Date _____

Degree Completion Deadline _____

Dissertation Title _____

Cognate _____

Results of the Defense (check one):

_____ Unconditional Approval of the oral defense and dissertation.

_____ Conditional Approval of the oral defense and/or the dissertation with minor revisions to be approved by the chair. Please explain below.

_____ Provisional Approval of the oral defense and/or the dissertation with major revisions to be approved by the committee. Please explain below.

_____ Rejection of the oral defense; minor or major revisions to the dissertation may or may not be required. Please explain below.

_____ Rejection of the dissertation. Please explain below.

Explanation of results (as needed):

Approval Signatures:

Dean, School of Education

Date

Dissertation Chair

Date

Committee Member

Date

Committee Member

Date

Doctoral Candidate

Date