

Please make sure to invite the PhD Program Director for the Pre-Defense presentation.

STUDENT INFORMATION

Name

G#

GMU E-mail

Pre-Defense Date: _____

Dissertation Title: _____

RESULT: ☐ Pass ☐ Fail

COMMITTEE MEMBERS

Committee Chair

Signature

Committee Co-Chair (if applicable)

PhD CS Program Director

Date

☐ Approved ☐ Disapproved