This Assessment form is to be completed collaboratively with input from all members of candidate’s Dissertation Committee after the public portion of the defense and the candidate’s meeting with Committee.

Candidate: ________________________________________________________

Dissertation Title: __________________________________________________

Defense Date: __________________________

ORAL PRESENTATION & DISCUSSION OF PROJECT

#1—Components. Assess the candidate’s performance in each of the following areas. Attach a page containing comments.

- Discussion of context/scholarly conversation surrounding project: Acceptable [ ] Unacceptable [ ]
- Discussion of methods used: Acceptable [ ] Unacceptable [ ]
- Discussion of results/data gathered: Acceptable [ ] Unacceptable [ ]
- Discussion of conclusions and implications: Acceptable [ ] Unacceptable [ ]
- Response to questions by committee: Acceptable [ ] Unacceptable [ ]
- Response to questions by public: Acceptable [ ] Unacceptable [ ]

#2—Overall. Indicate Committee’s overall assessment of dissertation defense:

Acceptable [ ] Unacceptable [ ]
WRITTEN DISSERTATION

#1—Components. Assess the effectiveness of the written dissertation in the following areas. Attach a page containing comments.

- Discussion of context/scholarly conversation surrounding project: Acceptable [ ] Unacceptable [ ]
- Discussion of methods used: Acceptable [ ] Unacceptable [ ]
- Discussion of results/data gathered: Acceptable [ ] Unacceptable [ ]
- Discussion of conclusions and implications: Acceptable [ ] Unacceptable [ ]

#2—Overall. Indicate Committee’s overall assessment of the written dissertation:

Acceptable [ ] Unacceptable [ ]

COMMITTEE SIGNATURES

Director: ____________________________
[Print name, sign, and date]

Member: ____________________________
[Print name, sign, and date]

Member: ____________________________
[Print name, sign, and date]

Member: ____________________________
[Print name, sign, and date]

Member: ____________________________
[Print name, sign, and date]

Member: ____________________________
[Print name, sign, and date]