

**UMKC School of Nursing & Health Studies - PhD Program**

**EXAMINATION/PROPOSAL/DEFENSE RESULTS**

**Form C**

Student Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

	<b>Signature</b>	<b>Evaluation</b> Pass-Superior; Pass-Adequate; No Pass-Inadequate
<p><b>Comprehensive Examination</b></p> <p><b>Date:</b></p>	<p>Chair: _____</p> <p>1 _____</p> <p>2 _____</p> <p>3 _____</p> <p>4 _____</p> <p>5 _____</p>	
<p><b>Dissertation Proposal Defense</b></p> <p><b>Date:</b></p>	<p>Chair: _____</p> <p>1 _____</p> <p>2 _____</p> <p>3 _____</p> <p>4 _____</p> <p>5 _____</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p><b>Dissertation Final Defense</b></p> <p><b>Date:</b></p>	<p>Dissertation Title: _____</p> <p>Chair: _____</p> <p>1 _____</p> <p>2 _____</p> <p>3 _____</p> <p>4 _____</p> <p>5 _____</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

The student completed an editorial defense of the dissertation with the supervisory committee prior to the final defense.

Approved: Ph.D. Committee 5/8/19

Copies to: UMKC Registrar's Office, Student Services, Chair, Student