

Final Oral Examination Form for Magna or Summa cum Laude Graduation

DATE: _____

TO: Director of Advising

FROM: Department of _____

The Supervisory Committee has examined _____
Student's Name / UF ID

on _____, in accordance with the regulations governing the _____
Date Magna or Summa

cum Laude Oral Examination, and has adjudged his/her performance as: _____ Satisfactory _____ Unsatisfactory.

The thesis has been examined by all members of the candidate's Supervisory Committee and has been

_____ Approved _____ Rejected.

Exceptions or qualifications are noted as follows: _____

SIGNATURES & FIELDS OF MEMBERS OF SUPERVISORY COMMITTEE:

Chair's signature - required

Field of Expertise

Second Member's signature - required

Field of Expertise

External Member's signature - required

Field of Expertise

Other Member's signature – if applicable

Field of Expertise

RECOMMENDED BY:

APPROVED BY:

Department Chair's Signature Date

Director of Advising Signature Date