The Department of Computer Science

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dissertation Defense** | | | | |  | |
| **Date of Defense:** | | |  | | **Time:** |  |
| **Name:** |  | | | | | |
| **Title of Dissertation:** | | | |  | | |
| **Advisor(s):** | |  | | | | |

Print Name: Sign x

Print Name: Sign x

Print Name: Sign x

Print Name: Sign x

**External Reader Contact Information:**

Name/Title:

Email:

Address:

Telephone #:

|  |
| --- |
| Additional Comments: |

Passed Failed