

DISSERTATATION DEFENSE EVALUATION FORM

Please complete this form to evaluate the dissertation defense. One form is submitted on behalf of the entire dissertation committee. The completed evaluations become part of the student's file and serve as a permanent record of the faculty's assessment of the dissertation. When members of the reading committee unanimously rank the dissertation as "superior," the student graduates with distinction. Completed forms should be submitted to the Dean of Students Office at Swift 104 or via email at <u>divinitydos@uchicago.edu</u>.

tudent's First and Last Name:
dvisor/Dissertation Chair:
committee Members:
itle of Dissertation:

Please evaluate the candidate on the following:

	Superior	Good	Fair	Poor
Argument Presented				
Use of Evidence/Data				
Engagement with Materials				
Oral Communication Skills				
Response to Questions				

Other Evaluations:

Overall Evaluation of the Defense: Pass Pass with revisions needed.	eded 🗌 Fail
If revisions are needed, please indicate who needs to approve the revisions:	Chair Only Committee
The Committee unanimously agrees that this dissertation should be awarded	distinction:
Committee Member Signature:	Date:
Committee Member Signature:	Date:

THE UNIVERSITY OF CHICAGO Divinity School

Dean of Students Office

Swift Hall, Suite 104 1025 E. 58th Street Chicago, IL 60637

Committee Member Signature:

Committee Member Signature _____

Committee Member Signature: _____

Date:	
Date:	
Date:	