



Stony Brook University

Department of Psychology

Date:

To: Director of Graduate Studies

From: _____
(Student's Name & ID #)

RE: Oral Defense of Dissertation

_____ has presented a successful dissertation
(Name) (ID#)
oral defense of the dissertation _____

before this committee:

Signatures of Members of the Committee

Examination Chair: _____
(SIGN and print name)

Dissertation Chair (Advisor): _____
(SIGN and print name)

(SIGN and print name)

(SIGN and print name)

Graduate Director (SIGN and print name)

