

**HONORS DEGREE WITH DISTINCTION
THESIS DEFENSE REPORT**

Name of Candidate: _____

Department or College: _____

For the Honors Degree with Distinction at the _____ Commencement
(semester, year)

Title of Thesis: _____

List all Committee Members starting with the Thesis Director:

Name	Department or Institution
_____	_____
_____	_____
_____	_____
_____	_____

The committee voted to pass the candidate.
 fail

Date of Thesis Defense	Signature of Representative of the Board of Senior Thesis Readers Present at Thesis Defense
------------------------	--

Endorsed: _____
 Director, University Honors Program

Return to: Undergraduate Research Program, 180 South College Avenue