LAU Adnan Kassar School of Business

MSHRM - Thesis Defense Result Form

Student Name: _____

Student I.D. #: _____

Program/Department: _____

Date of Thesis Defense: _____

Thesis Title: _____

_____

Result of Thesis Defense

□ Thesis was successfully defended. Passing grade is granted

□ Thesis is approved pending correction. Passing grade to be granted upon review and approval of thesis advisor.

□ Thesis is not approved. Grade NP is recorded

Committee Members:

Advisor
(Name and signature): _____

Committee Member
(Name and signature): _____

Committee Member
(Name and signature): _____

Advisor's report on completion of corrections (if any):

_____

_____

Changes approved by the thesis advisor:

_____

_____

Signature: _____

Date: _____

Acknowledged by Director of MSHRM, Adnan Kassar School of Business:

_____