Results of Master's Thesis Form

Student:_____

ID #:_____

Advisor:_____

Thesis Title:_____

Date of Oral Presentation:_____

Committee Chair:_____

Committee Member:_____

Committee Member:_____

Results:

_____ Pass
_____ Fail

Notes:

****** If 'Pass', student submits to CS department archive: cs.uoregon.edu/Documents/submit.php ******

Committee Members:

_____ _____
Signature *Date*

_____ _____
Signature *Date*

_____ _____
Signature *Date*