



UNIVERSITY  
*of* HAWAII®  
MĀNOA

### **Master's Plan A – Thesis Evaluation (Form III)**

This form is to be signed by the chair and committee members who participate in the final defense, including any proxy members. By signing this form, committee members indicate approval or disapproval of the content of the manuscript and the student's ability to defend it.

Submit this form immediately after results of the final exam become available.

## Master's Plan A – Thesis Evaluation (Form III)

**Part I. To be completed by the student**

Name \_\_\_\_\_ UH ID No. \_\_\_\_\_  
LAST, FIRST, M.I.

Graduate Program \_\_\_\_\_ Degree Objective \_\_\_\_\_  
INCLUDE SPECIALIZATION IF APPLICABLE.

Date of Final Oral Exam / Defense \_\_\_\_\_  
MM/DD/YY

I certify that I have read and understand the policies and instructions for this form.

\_\_\_\_\_  
 Signature of Student Date

**Obtain signatures from the thesis committee:**

We certify that we have read and understand the policies and instructions for this form.

Name (Print or Type)	Signature	Passed	Failed
Chair			
Member			
Member			
Member			

**Part II. To be completed by the graduate chair**

Approved       Not Approved

\_\_\_\_\_  
 Signature of Graduate Chair Date

**GRADUATE EDUCATION ACTION**

Approved     Not Approved    By \_\_\_\_\_ Date \_\_\_\_\_

Remarks

**C: Graduate Program / Student**