

Student:		Exam Date:	
Dissertation Advisor:		Grad Year:	
Exam Committee:			
Chair:	Examiner:	Examiner:	
Please Check One Exam Decision:	Clear Pass	Conditional Pass	Fail
Report of the Results: Please comment on the student's performance in the following areas. If there are specific recommendations, please list below (if report exceeds space provided, please attach additional sheets)			

Experimental approach and written proposal (Strengths/Weaknesses):

Innovation and Creativity (Strengths/Weaknesses):

Written Proposal (Strengths/Weaknesses):

Oral Defense (Strengths/Weaknesses):

Knowledge base (proposal-related and general):

**Recommendations:** 

Signature of Chair:

By entering your name you acknowledge that all the information above is correct, to the best of your knowledge, and that all recommendations have been discussed with and agreed upon by all committee members.

Please email the completed form to Danny Gonzalez at danny@hms.harvard.edu