

RECORD OF DISSERTATION AND ORAL EXAMINATION DEPARTMENT OF PHYSICS AND ASTRONOMY

| Students Name: | | | | |
|---|--|--------------------------|-----------|--|
| Advisor: | | Student Number: | | |
| 1. Dissertation Title: | | | | |
| 2. Dissertation has been: | ccepted Rejected | | | |
| 3. Oral examination in defense of | the dissertation was conducte | ed on: | | |
| The student Passed | | Date | | |
| ☐ Failed Reas | son: | | | |
| 4. What will student do after gradu | uation from Michigan State Un | iversity (circle one)? | | |
| Postdoctoral | Industry | Other: Please ex | plain | |
| 5. What will students mailing add | ress and permanent email add | ress be after graduation | from MSU? | |
| Signatures of Guidance Committee Members: Printed names of Guidance Committee Members: | | | | |
| | Chairperson of Guidance | Committee | Date | |
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| 6. Any major (beyond basic grammer and format | _{ting}) revisions required (if so, wha | t <u>)?:</u> | | |
| 6a - Were the major revisions listed above completed. (Only needed if there were major revisions) | Chairperson of Guidance Committee | | Date | |
| 7. Graduate Program Director | | | _ | |