



## C. Summary of Thesis Committee Meeting Where Permission to Prepare and Defend Thesis Given

Date:

\_\_\_\_\_  
(Student's Name)

\_\_\_\_\_  
(Student's I.D. Number)

\_\_\_\_\_  
(Thesis Advisor)

\_\_\_\_\_  
(Graduate Program)

This is to confirm that the following thesis meeting occurred for the above student.

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Place: \_\_\_\_\_

**Members of the Committee-note absent or present**

*Please Type Name:*

\_\_\_\_\_, *Mentor and Chair*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_, *Ex Officio*

**Attached is meeting summary, which also must be completed, as for all other Committee meetings**

*Fisk Graduate Student Handbook for Fall 2016 Entrants*

Summary of student performance, and recommended next steps shared with the student in person and in writing as a follow-up email:

This meeting confirms that \_\_\_\_\_ (**Graduate Student**) has been approved to set a Defense Date for the MA Degree in \_\_\_\_\_. Yes \_\_\_\_\_ No \_\_\_\_\_  
**(Graduate Program)**

Candidate: \_\_\_\_\_  
**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Thesis Research Advisor: \_\_\_\_\_  
**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Program DGS: \_\_\_\_\_  
**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

DGS, please send a copy of this form, once completed, to [ccoca@fisk.edu](mailto:ccoca@fisk.edu).