

## Certification that Mandatory Corrections were Made to a Successfully Defended Dissertation



In the event that a student passed the oral examination in defense of the thesis/dissertation but is required to make significant changes in the dissertation (i.e., choice 1d or 1e was selected on the oral defense examination form), the major professor or defense chair must obtain the signatures of faculty members who were listed to review the corrections, if 1d was chosen the entire defense committee in the event that the thesis was not acceptable as written and required a complete revision if 1e was chosen. This form serves to verify that the required changes were made and that the revised dissertation meets the approval of the appropriate faculty members.

Student Name	<input type="text"/>	Department	<input type="text"/>
URI ID	<input type="text"/>	Program	<input type="text"/>
Date Examination Taken	<input type="text"/>	Specialization (if applicable)	<input type="text"/>

**Student:** Please identify your committee members by entering their names in the appropriate boxes below (e.g., inside member: Jane Doe, etc.) This form should be saved in the following format, URIID\_Lastname\_Firstname\_CMC.pdf (ex: 1002xxx34\_Smith\_John\_CMC.pdf) and sent as an attachment to either the major professor or the faculty member identified to review the changes.

If the degree committee chose (1d) on the oral defense form, the faculty member(s) designated to review the required changes to the thesis signify their approval of the revised document with the signatures below.

**Faculty Member:** Please electronically sign the form, and then send it to the next member to also sign and verify that changes were made.

Major Professor	<input type="text"/>	e-mail	<input type="text"/>	Signature	<input type="text"/>
Designated Faculty	<input type="text"/>	e-mail	<input type="text"/>	Signature	<input type="text"/>
Designated Faculty	<input type="text"/>	e-mail	<input type="text"/>	Signature	<input type="text"/>
Designated Faculty	<input type="text"/>	e-mail	<input type="text"/>	Signature	<input type="text"/>

If the degree committee chose '1e' on the oral defense form, the entire membership of the defense committee signifies their approval of the revised document with their signatures below.

**Major Professor:** Please electronically sign the form, and then send to the next faculty member listed, and so on. By signing electronically the faculty members are signifying approval of the revised document.

Major Professor	<input type="text"/>	Signature	<input type="text"/>	Department	<input type="text"/>
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Co-major Professor (if appropriate)  Signature  Department

Program Committee Member (inside)  Signature  Department

Program Committee Member (outside)  Signature  Department

Additional Member (if applicable)  Signature  Department

Additional Member (if applicable)  Signature  Department

Inside Additional Defense Committee  Signature  Department

**Chair of Defense Committee:** After signing, please send the completed form to the Graduate School at [gradforms@etal.uri.edu](mailto:gradforms@etal.uri.edu) as an attachment. Please write CMC in the subject line of the e-mail and copy-in (cc:) the student

Chair of Defense Committee  Signature  Department

**Graduate School Use Only**

The Formatter has been notified  Yes  No

Graduate School Dean

Graduate School

**Notes**