



University of Windsor

Faculty of Graduate Studies

Post-Defence Committee Approval Form

Instructions: List below each member of your approved Master's or Doctoral Committee, including any additional and/or special members. Follow the [instructions for obtaining signatures and submitting the completed form after the defence.](#)

Master's

Doctoral

Student Name:

Program Name:

Title of dissertation, thesis, or major paper:

Date of Final Oral Defence:

The document has received final approval by each Committee member:

Signature:

PhD External Examiner:
(doctoral committee only)
Examiner's University/
Institution:

Supervisor:

Program Reader 1:

Program Reader 2:
(doctoral committee only):

Outside Program Reader:

Outside Reader's Program:

Special and/or additional
members(s) (if applicable):

Follow the [instructions for obtaining signatures and submitting the signed form after the defence.](#)