

#### SUCCESSFUL DEFENSE OF THE MASTER’S THESIS

The undersigned verify that the final oral defense of the thesis has been successfully completed by the following master’s candidate and that the thesis is ready to submit to the Graduate School pending revisions.

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| **Name**  *(print or type clearly)* | **USF ID#** | **Degree** |
| **Master’s Candidate** |       | U     **-**      | MS |

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| Graduate Program | Marine Science |
| Graduate Department | Marine Science |
| Dissertation Title |       |

Examining Committee

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|  | **Name** (print or type clearly) | **Signature of Approval** |
| [ ]  Major Professor**[ ]  Co-Major Professor** |       |  |
| [ ]  Co-Major Professor**[ ]  Member** |       |  |
| Member |       |  |
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| Member |       |  |
| **Member** |       |  |
| Defense held on**(date)** |       |
| Successful Defense Form signed (date) |       |