**MC 5010: APPROVAL OF**

**PROJECT/CREATIVE COMPONENT**

**ORAL DEFENSE**

Top of Form

Student Name:

Bottom of Form

Top of Form

Student ID:

Bottom of Form

Top of Form

Degree Program:

Bottom of Form

**Title and Description of Project:**

Top of Form

Bottom of Form

**Comments (Optional):**

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Bottom of Form

Committee Chair Electronic Signature and Date:

Committee member Electronic Signature and Date:

Committee member Electronic Signature and Date:

***NOTE:*** *After all signatures have been collected, email a copy of this form to the* ***Graduate Coordinator****, Dr. Jared L. Johnson* jared.l.johnson@okstate.edu*, and to Melissa Coldiron,* *melissa.coldiron@oksatate.edu**. A copy of this form will be placed this in the student’s SMSC graduate file and will be used to verify your eligibility for graduation with the Graduate College.*