

School of Education
Ed.D. Text and Oral Defense Ballot



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_____	_____	_____	_____
Last or Family Name	First Name	Middle	Loyola Student I.D.
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_____	_____	_____	_____
Street Address	City	State	Zip Code
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_____	_____	_____	_____
Home Phone	Loyola Email Address	@luc.edu	Cohort, if applicable
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_____	_____		
Program			

Instructions:

This ballot is used to approve both the text and the final public oral defense of the dissertation.

Committee Members:

All voting members must sign this ballot. You indicate approval of the text and oral defense of the dissertation by signing this form. You may indicate a dissenting vote by signing the bottom part of this form.

Approved: _____
Director's Signature *Printed Name* *Date*

Approved: _____
Reader's Signature *Printed Name* *Date*

Approved: _____
Reader's Signature *Printed Name* *Date*

Approved: _____
Reader's Signature *Printed Name* *Date*

Approved: _____
Reader's Signature *Printed Name* *Date*

Dissenting Vote: _____
(Reader only) *Reader's Signature* *Printed Name* *Date*

PLEASE USE THE REVERSE SIDE FOR COMMENTS