

**University of Texas at Austin
Department of Astronomy**

PhD Defense Evaluation Form

Name of student: _____

Date: _____

Name of Supervisor or Committee Member: _____

	no pass	low pass	pass	high pass
Mastery of Dissertation Subject				
Mastery of Field				
Mastery of Dissertation Research Methodology				
Quality of Research				
Public Presentation (Content and Delivery)				
Ability to Defend Research and Answer Questions				
Evidence of Independence				

Comments: