

M.A. Plan B Defense Form

Department of Media and Information
College of Communication Arts & Sciences
Michigan State University
(updated fall 2021)

Student Name: _____ APID: A _____
(EMPL ID)

Title of Poster: _____

Date of Defense: _____ (You must be enrolled for at least 1 credit)

_____ The Poster is satisfactory.

_____ The Poster is not satisfactory, student needs to do the following:

_____ The Poster has been revised as instructed and is now satisfactory. Date: _____

(Advisor Signature)

_____ Poster is rejected. Recommendations:

Examination Committee Member #1 Signature

Examination Committee Member #1 Printed Name

Examination Committee Member #2 Signature

Examination Committee Member #2 Printed Name

Director of Graduate Studies Signature

Director of Graduate Studies Printed Name

