

THE UNIVERSITY OF NEW MEXICO  
The Office of Graduate Studies  
**REPORT ON THESIS OR DISSERTATION**

Author: \_\_\_\_\_ ID#: \_\_\_\_\_ Graduate Unit: \_\_\_\_\_

Dissertation or Thesis Director: \_\_\_\_\_ Reader: \_\_\_\_\_

Title of Thesis or Dissertation:  
\_\_\_\_\_  
\_\_\_\_\_

1. Please rate the thesis or dissertation on the following:

	<i>Excellent</i>	<i>Very Good</i>	<i>Good</i>	<i>Fair</i>	<i>Inferior</i>
a. Substance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Methodology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Originality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Style	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. <i>Evaluation of the work as a whole</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Please summarize briefly your reaction to the thesis or dissertation.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Do you recommend the acceptance of this manuscript for the degree?

Yes                       No

*Reader:* Please sign and pass this form to the committee chairperson.

\_\_\_\_\_  
Reader

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chairperson of Committee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chairperson, Major Graduate Unit

\_\_\_\_\_  
Date

Revision 6/06

*Graduate Unit Chairperson:* Please collect all readers' forms and submit to the Graduate Office in sealed envelope.