



PSYCHOLOGY DOCTORAL PROGRAM @ JOHN JAY COLLEGE
SECOND DOC
DEFENSE APPROVAL FORM

Date: _____

Candidate: _____

Training Area: _____

Title: _____

Signatures below indicate that the committee member has read the student's Second Doc document and agree that this document is ready for defense. The student may now proceed to schedule a defense date.

Second Doc Mentor:

Print

Sign

Date

Committee Members:

Print

Sign

Date

Print

Sign

Date

Please submit this form along with a clean copy of the approved Second Doc to the Psychology Office at least 2 weeks prior to the desired defense date.