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|  | ▶ **Non-Disclosure of Thesis Defense Deliberations****Student Name: Student ID:****Student AUC email address:****Program:** **Thesis Title:**  |

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|  | **I the undersigned hereby commit to the non-disclosure of thesis defense deliberations to any parties outside the thesis defense committee.** **Thesis Supervisor Name: Signature:****Thesis Co-supervisor(s) Name(s): Signature:****External Examiner/First Reader Name: Signature:** **Internal Examiner/Second Reader Name: Signature:****Thesis Defense Moderator Name (if applicable): Signature:**  |