

Appendix F

Scholarly Project Defense Form

This is to certify that _____, a
DNP student in the College of Nursing, has successfully defended his/her scholarly project
proposal entitled _____ and it
has been approved as meeting the requirement for the Degree of Doctor of Nursing Practice.

Oral defense approved

Date: _____

Manuscript approved

Date: _____

Scholarly Project Committee Chairperson

Date

Faculty Committee Member

Date

Residency Site Mentor

Date

DNP Graduate Program Director

Date