



Defense Approval and Scheduling Form

Dear Student: Select a date/time when your committee members can attend and reserve the room for your defense. (Your department/program secretary is a great resource for available room information.)

- Your defense may not be scheduled during the period of final examinations at the end of the semester (see academic calendar at the front of the current catalog).
- This form must be completed and received in the Office of Graduate Education (C 2201) **NO LESS THAN FIVE WORKING DAYS** before the scheduled time of the defense.

Print Student Name _____ Student ID _____

Program _____ MS thesis defense PhD dissertation defense

Time _____ am pm on _____
Day of week Month Day Year

Room _____ of the _____ Building

Thesis/Dissertation Title (print clearly): _____

Do any of the following pertain to this thesis/dissertation: (1) it contains patentable content; (2) it is subject to export control under ITAF or EAR; or (3) it is covered under an existing proprietary or non-disclosure agreement? If you are unsure, please discuss with your major professor before answering. Yes No

If you answered Yes, the Office of Research Affairs (OH 102) must complete the Restricted Thesis/Dissertation Declaration below. A restricted defense is not announced the campus community, and the thesis/dissertation documents will be held in the library until the specified release date.

Restricted Thesis/Dissertation Declaration (to be completed by the Office of Research Affairs)		
This <input type="checkbox"/> is	<input type="checkbox"/> is not	a restricted thesis/dissertation. Release date if restricted: _____
_____ Signature of designated official	_____ (Print Name)	_____ Date

I request to defend on the date specified above: Student Signature _____ Date _____

Committee approvals:
I have reviewed this thesis/dissertation and verified that it appears to be an acceptable manuscript in terms of technical quality and proper expression and usage in American Standard English. (You are encouraged to provide written comments to the student immediately following your review, so that the student may work on revisions prior to the defense.)

Major Professor Signature (Print Name) Date

Graduate Representative Signature (Print Name) Date

Committee Member Signature (Print Name) Date

Committee Member Signature (Print Name) Date

Committee Member Signature (Print Name) Date

Committee Member Signature (Print Name) Date

Committee Member Signature (Print Name) Date