REQUEST TO SCHEDULE FINAL DEFENSE

IMPORTANT Print, or type, the information so that it is legible. This form should be completed for the department or program and forwarded to the Graduate School, *Copied for the department* or program and forwarded to the Graduate School, *Alumni Hall* at least two weeks prior to exam.

TO Associate Dean of the Graduate School

This is to inform you that

Student's Name

Student's ID Number

in _____
    Department Program

with _____
    Dissertation Title

is scheduled to defend his/her dissertation

on _____
    Date

at _____
    Time

in at _____
    Location