

**Dissertation Defense Information Sheet**  
**(Please fill out and return to Jeanne in Rm. 202 VAN)**

**Name:** \_\_\_\_\_ **Univ ID:** \_\_\_\_\_

**Degree sought:** [ ] M.S. [ ] Ph.D.

**Research Advisor** \_\_\_\_\_

**Expected semester of graduation (MS or PhD):** \_\_\_\_\_

**Degree Sought:** [ ] MS degree; [ ] PhD degree

**Thesis Title:** \_\_\_\_\_

**Committee Members:** (three required for M.S.; five for Ph.D.)

(1) \_\_\_\_\_ (Chair) (2) \_\_\_\_\_

(3) \_\_\_\_\_ (4)\* \_\_\_\_\_

(5)\* \_\_\_\_\_ (\*PhD candidate only)

**Department/University of Outside Member** \_\_\_\_\_

**Proposed date of the defense if known (if not yet scheduled, please indicated the planned month, but let me know at least 3 weeks before exam):**

\_\_\_\_\_ (weekday) \_\_\_\_\_ (date) \_\_\_\_\_ (time) \_\_\_\_\_ (room)

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Candidate's signature \_\_\_\_\_ Date \_\_\_\_\_ / Advisor's signature \_\_\_\_\_ Date \_\_\_\_\_