

Request to Schedule Dissertation Defense for the Ph.D. Degree



NYU

TANDON SCHOOL OF ENGINEERING

Graduate Academics

INSTRUCTIONS

Polytechnic Institute

- This form is to be completed by the Chairperson of the Ph.D. Guidance Committee and then sent to the Office of the Associate Dean for Graduate Academics (see Prof. Jose Ulerio in RH413) at least **2 weeks prior to the scheduled defense date**.
PLEASE INCLUDE A COPY OF THE ABSTRACT WITH THIS APPLICATION.
- When this form is approved, copies of a notice, entitled "Notice of Scheduled Final Examination for the Ph.D. Degree" will be sent to the student, the committee members, the department head, and the Guidance Committee Chairperson for distribution to select members of the faculty as an invitation to attend the exam.

STUDENT INFORMATION

_____	_____	N	_____
First Name	Last Name		Univ ID
_____	_____		_____
E-mail Address	Telephone Number		Net ID
_____	_____		_____
Academic Home Department			Academic Major

Previous Degrees (e.g., B.S. Electrical Engineering)	School	Country	Year

_____ Semester & Year Passed Qualifying Exam

GUIDANCE COMMITTEE

_____	_____	_____	_____
Chairperson	Chairperson E-mail	Dissertation Advisor	Dissertation Advisor E-mail
_____	_____	_____	_____
Committee Member#1	Committee Member#1 E-mail	Committee Member#2	Committee Member#2 E-mail
_____	_____	_____	_____
Committee Member#3	Committee Member#3 E-mail	Committee Member#4	Committee Member#4 E-mail
_____	_____	_____	_____
Committee Member#5	Committee Member#5 E-mail	Committee Member#6	Committee Member#6 E-mail

_____	_____	_____	_____
Major	Date Satisfied	Minor (if applicable)	Date Satisfied

_____ Dissertation Title

REQUEST TO SCHEDULE EXAMINATION

I have verified the above information and hereby request that the dissertation defense and the final examination for the Ph.D. for the above named candidate be scheduled as follows:

Date of Examination: _____ Time: _____ Location: _____

_____	_____	_____
Chairperson's Name	Signature	Date

STUDENTS: DO NOT WRITE BELOW THIS LINE
ADMINISTRATIVE ACTION

_____	_____	_____
Jose Ulerio, Operations Manager	Signature	Date
Graduate Academics		