

Request for Thesis Defence

Submit to the Office of Research and Graduate Studies, preferably six weeks prior to the proposed defence date. Include an electronic copy of the thesis.

Student Identification

Name: _____

Program: _____

Thesis title: _____

Thesis Defence

Preferred Date: _____ Time: _____

Alternate Date 1: _____ Time: _____

Alternate Date 2: _____ Time: _____

Requirements for the defence (room capacity, audiovisual, other special requirements):

Approvals

By signing below, members of the student's Supervisory Committee certify that they have reviewed the thesis and agree that the thesis meets the standards of the program, conforms to submission guidelines for thesis preparation, and is ready for defence.

| | Name (print/type) | Signature | Date |
|-------------------------------|-------------------|-----------|-------|
| Primary Supervisor | _____ | _____ | _____ |
| Co-supervisor (if applicable) | _____ | _____ | _____ |
| Supervisory Committee Member | _____ | _____ | _____ |
| Supervisory Committee Member | _____ | _____ | _____ |
| Supervisory Committee Member | _____ | _____ | _____ |
| Graduate Program Coordinator | _____ | _____ | _____ |

NOTE: The proposed date of the thesis defence is considered to be tentative, and cannot be fully confirmed, until the External Examiner has submitted the External Examiner Report.

Distribution: Original with Office of Research and Graduate Studies; copy to the Graduate Program Coordinator.