



REQUEST FOR DISSERTATION DEFENSE

Name: _____

Dissertation Advisor: _____

Research Focus Area (select one):

Mechanical and Aerospace Engineering

Biomedical Engineering

Materials Science and Engineering

Industrial & Human Factors Engineering

Title of Dissertation:

The members of my committee are:

Name	Institution/Affiliation
1.	
2.	
3.	
4.	
5.	
6.	

The examination is scheduled for:

Date:

Time:

Location:

Student's Signature

Date

Approved by:

Dissertation Advisor

Date

Program Director

Date

Note: This request must be submitted to the Ph.D. in Engineering Program Office no later than 30 days prior to examination date.