

Instructions for Request for Dissertation Defense

Note: This is a fillable form that eliminates the need to print-out and write-in your answers. You can simply fill-out the form electronically, and then print-out the results. This fillable capability however does not allow you to save the information that you have electronically filled-in.

This request must be received by the Dean of the Graduate School **before** the actual date of the defense.

1. Complete and obtain signatures from
 - a. Committee Chairperson
 - b. All Committee Members
 - c. Graduate Advisor
2. Submit the form with original signatures to the Graduate School office for approval by the Dean of Graduate School.

Reminder: Make sure you retain a copy for your records. You must print the document and mail it in or bring it to the UTA Graduate School office at the address below.

Graduate School
Room 333 Davis Hall
PO Box 19167
Arlington, TX 76019-0167

**THE GRADUATE SCHOOL
THE UNIVERSITY OF TEXAS AT ARLINGTON
REQUEST FOR DISSERTATION DEFENSE**

(Notice of Acceptance of the Doctoral Dissertation for the Purpose of Giving the Final Oral Examination on the Dissertation and on such other Parts of the Student's Program as the Supervising Committee may Determine.)

This request must be received by the Graduate School before the defense date. Students and advisors should consult the current Graduate Calendar for deadline dates applicable to the scheduling and administration of the dissertation defense.

This is to report that the committee for the doctoral candidate named below has received the doctoral dissertation for the purpose of defense and now requests that the defense be set as shown below.

Name of Candidate: _____ UT-Arlington ID Number: 1000_____

Program: _____

Date and time of Requested Defense: _____
(Month) (Day) (Year) (Hour)

The dissertation defense will be held in: -----
(Room) (Building)

By the signature below, each member of the supervising committee indicates the intention to participate in the defense at the time and place specified. The doctoral dissertation defense may not be conducted with fewer than three members of the supervising committee present.

Name (typed)

Signature

Date(mm/dd/yy)

Dissertation Supervisor (Dissertation Committee Chairman)

Co-Chair (If Desired)

Committee Member (External)

Committee Member

Committee Member

Ph.D. Director