



MARQUETTE UNIVERSITY GRADUATE SCHOOL ANNOUNCEMENT OF PUBLIC DEFENSE OF THE DISSERTATION

If you need any assistance completing this form, please contact the Graduate School at 414-288-7137.

This form obligates you, your Dissertation Director, and your committee to a public defense of your dissertation. The form is also used by the Graduate School to announce the schedule of upcoming defenses to the campus community. The dissertation defense schedule is published on the Graduate School's Web site.

You are solely responsible for obtaining the signatures of all participants. Submit the form to the Graduate School with an electronic version of your abstract, emailed to grad.records@mu.edu, **at least two weeks prior to the scheduled defense date** so that we can appropriately notify the university community.

STUDENT INFORMATION

Name: Adviser:

Program: MUID:

I agree to the dissertation defense date, time, and location as listed below. I understand this form must be submitted to the Graduate School at least two weeks prior to the scheduled defense.

Signature: Date:

DEFENSE SCHEDULE

Indicate when and where the defense will take place including the name of the building and room number.

Defense Date: Defense Time:

Defense Location:

Dissertation Title:

COMMITTEE MEMBERS

The signature of each committee member is required. Once signed, this form signifies the approval of the above listed defense date and time. It also commits each member of the committee to read the dissertation and attend the defense.

TYPED NAMES

SIGNATURES

Dissertation Director: Dissertation Director:

Committee Member: Committee Member:

Committee Member: Committee Member:

Committee Member: Committee Member:

Committee Member: Committee Member:

The signature of the Department Chair or Director of Graduate Studies is required.

TYPED NAME SIGNATURE

FOR GRADUATE SCHOOL USE ONLY:

Posted Date: _____