

# Notice of PhD Thesis Submission for Display and Oral Defence

\*Please submit this form to MGO at least 6 weeks before the oral defence.

UW ID# \_\_\_\_\_ Department \_\_\_\_\_  
Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Title of Thesis:

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## **Particulars of Oral Defence:**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Place: \_\_\_\_\_

## **Request For Approval of PhD Thesis Oral Defence Committee**

**Proposed External Examiner:** Please attach the CV of the External Examiner and the pre-approval of the External Examiner by the Associate Dean of Graduate Studies (include the statement of independence).

Name of External Examiner:

Mailing Address:

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Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Attending: \_\_\_\_\_

Teleconferencing: \_\_\_\_\_

## **Balance of Proposed Thesis Committee:**

Supervisor/Co-Supervisors:

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Departmental Members:  
(two required)

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Internal-External Member, dept:

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Additional Member: (optional)

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## **Approved by:**

Chair/Graduate Officer: print name \_\_\_\_\_ Signature \_\_\_\_\_

Associate Dean, Graduate Studies: Adam Kolkiewicz \_\_\_\_\_  
**(MGO will obtain)**