	Dissertation	Defense	Notification	
Student			ID Number	
Department			Mojor	
Бераппепс			Major	
Location			Date	Time
Title of Dissertation				
Title of Dissertation				
Degree Name				
Name of Hooder				
Student		Signature		Date
Dissertation Committee Cl	hair	Signature		Date

Copies tobefiled in themajor departmentandtheGraduateSchool