

Computing and Information Systems Ph.D. Request to Schedule Dissertation Proposal Defense

Student Name _____ ID _____

Signature _____ Date _____

Proposed Dissertation Title _____

Abstract

Date _____ Time _____ Location _____

Name	Signature	Chair
CIS PhD Faculty _____	_____	_____
CIS PhD Faculty _____	_____	_____
CIS PhD Faculty _____	_____	_____
CIS PhD or other Grad Faculty _____	_____	_____
Graduate School _____	_____	_____
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