



CRIMINAL JUSTICE DOCTORAL PROGRAM
DISSERTATION DEFENSE (THIRD EXAM) SCHEDULE FORM

Student: _____

EMPLID: _____

The undersigned dissertation chair and committee members have received the student's written dissertation. Each member acknowledges that they were granted sufficient time to review the document and provide critical feedback to the student. After conferring as a committee, we feel that the student listed above is now ready to schedule the dissertation defense.

Title of Dissertation:

Committee Chair

Name

Affiliation

Signature

Committee Member

Name

Affiliation

Signature

Committee Member

Name

Affiliation

Signature

External Committee Member

Name

Affiliation

Signature

APO/EO Signature: _____

Scheduled Date/Time/Location: _____