

**DISSERTATION
DEFENSE
SCHEDULING FORM**

DATE: _____

I. INFORMATION

STUDENT: _____
(Student Name) (ID #)

STUDENT EMAIL: _____

DISSERTATION TITLE: _____

DATE OF DISSERTATION DEFENSE PRESENTATION: _____

LOCATION OF DISSERTATION DEFENSE PRESENTATION: _____

As Dissertation Chair, my signature below certifies that the aforementioned student has submitted or published at least **3 first author peer reviewed journal papers**. A copy of the student's complete ISSTBE flight plan, which lists the publications and other research activity must be submitted with this form to the program directors.

SIGNATURE: _____
Dissertation Committee Chair, BE Department

If the aforementioned student has not met the publication requirement, please do not sign above and attach a list of the student's current publications and explain future plans for publication.

II. CONSTITUENCY OF DISSERTATION COMMITTEE

The following individuals are members of the ISSTBE Dissertation Committee for the aforementioned doctoral student. Any individual listed below that serves as a co-advisor to the student is indicated below. Each person has been contacted and has previously signed the appointment to dissertation committee form. Each individual has a graduate faculty appointment in their respective department listed below.

- | | | | | | |
|----|--------------------------------------|---|---|---|---|
| 1. | _____ | , | _____ | , | _____ |
| | Name of Dissertation Committee Chair | | Dept. sponsoring Graduate Faculty Appointment | | Role (primary advisor, co-advisor, or member) |
| 2. | _____ | , | _____ | , | _____ |
| | Name | | Dept. sponsoring Graduate Faculty Appointment | | Role (primary advisor, co-advisor, or member) |
| 3. | _____ | , | _____ | , | _____ |
| | Name | | Dept. sponsoring Graduate Faculty Appointment | | Role (primary advisor, co-advisor, or member) |
| 4. | _____ | , | _____ | , | _____ |
| | Name | | Dept. sponsoring Graduate Faculty Appointment | | Role (primary advisor, co-advisor, or member) |
| 5. | _____ | , | _____ | , | _____ |
| | Name | | Dept. sponsoring Graduate Faculty Appointment | | Role (primary advisor, co-advisor, or member) |

In addition to the foregoing members of the Dissertation Committee, the following committee representatives, each of whom has agreed to serve, will serve as External Members of the Dissertation Committee:

1. External Member Name _____

(Mailing address and email address of external member)

2. External Member Name _____

(Mailing address and email address of external member)

III. APPROVAL BY Director of ISSTBE

The student listed above has been completed program requirements and is approved to defend their dissertation on the requested date.

Signature of ISSTBE PhD Program Director

Date

INSTRUCTIONS: Student is to send completed form and completed ISSTBE flight plan to ISSTBE PhD Program Director at least 3 weeks prior to date of intended thesis defense. Dissertation Committee Chair and student must retain a copy of this form.