Eberly College Thesis and Dissertation Defense Date Declaration Form

Student Name				
E-mail				
Degree	M.A. M.S. M.S.W. M.F.A. M.P.A. M.L.S. Ph.D.			
	Other			
Department				
Area of Emphasis				
Defense Date			Time	Location
Committee Member	Names			
Chair				
Member				
This form must be so		rtmenta	l graduate records as	ssistant two weeks prior to the
Date submitted			Staff signature	

Following submission this form is to be emailed to the Eberly College Director of Graduate Studies