## **Form M Instructions for Request for Dissertation Defense**

Note: If you have the free Adobe Acrobat Reader software, this form can be filled in online but the data cannot be saved. You will have to re-do the PDF form every time you open it. Make sure you retain a copy for your records. You must print the document and bring it to the Graduate Program Coordinator.

- 1. Enter all required information, except for that related to the results of the evaluation and print form.
- 2. Acquire necessary signatures from:
  - a. Chairperson
  - b. Committee Members
  - c. Graduate Advisor
- 3. Submit completed form with original signatures to the Graduate Program Coordinator.

**Reminder**: Make sure you retain a copy for your records. You must print the document and bring it to the Graduate Program Coordinator.

## THE GRADUATE SCHOOL THE UNIVERSITY OF TEXAS AT ARLINGTON REQUEST FOR DISSERTATION DEFENSE

(Notice of Acceptance of the Doctoral Dissertation for the Purpose of Giving the Final Oral Examination on the Dissertation and on such other Parts of the Student's Program as the Supervising Committee may Determine.)

This request must be received by the Graduate School before the defense date. Students and advisors should consult the current Graduate Calendar for deadline dates applicable to the scheduling and administration of the dissertation defense.

This is to report that the committee for the doctoral candidate named below has received the doctoral dissertation for the purpose of defense and now requests that the defense be set as shown below.

Name of Candidate:		UT-Arlington ID Number: 100			
Program:					
Date and time of Requested Defense: _				<del></del>	
	(Month)	(Day)	(Year)	(Hour)	
The dissertation defense will be held in	:				
	(Room)	(Building)			
By the signature below, each medical defense at the time and place sthan three members of the supersolutions.	specified. The docto	oral dissertation defen	cates the intention s se may not be cond	to participate in the lucted with fewer	
Name (typed)	Signature			Date(mm/dd/yy)	
Dissertation Supervisor (Dissertation Committee	e Chairman)				
Committee Member					
Committee Member					
Committee Member					
Committee Member					
Committee Member					
Graduate Advisor					

You may be entitled to know what information The University of Texas at Arlington (UT Arlington) collects concerning you. You may review and have UT Arlington correct this information according to procedures set forth in UTS 139. The law is found in sections 552.021, 552.023 and 559.004 of the Texas Government Code.