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Master's and Doctoral Defense Notification Form

This form must be completed and submitted to SharePoint at least 3 weeks before your defense

Important note: ONLY documents submitted via SharePoint will be accepted. No handwritten forms will be accepted.

	☐ Doctoral	Enrollment Requirement:
Semester of Graduation:	Spring Summer Year	
Student Information:		YES NO
Student R Number		
Last Name	First Name	
Address		
	Zip Code Country	
Daytime phone number		
Degree Information:		
Degree Sought: M.A. M.S. MM	I/ □ DMA □ _{EdD} □ PhD Other (sp	pecify)
Major:	leD	
Day and Date of Examination:	Time: Building and I	Room No:
Dissertation Title: (please type)		
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