

*Room Request for
Dissertation Defense*

Student Name: _____

Date of Defense: _____

Time: _____

Title of Dissertation: _____

Committee Members:

Chair _____ E-mail: _____

_____ E-mail: _____

_____ E-mail: _____

Outside Observer _____ E-mail: _____

Do you need a room equipped for skyping? Yes No

Do you need a room equipped for teleconferencing? Yes No

Do you need a room with a projector? Yes No

Do you have any additional needs? Yes No

If you have special needs, please provide written explanation:

I affirm that I have consulted with all members of my committee and they have agreed to the above date and time:

Signature: _____ Todays Date: _____