

College of Education and Human Services
West Virginia University
THESIS/DISSERTATION DEFENSE APPROVAL FORM

DATE: _____

NAME: _____
Last First Middle

STUDENT ID: _____ EMAIL: _____

DEGREE: _____ MAJOR TITLE: (from the Curriculum Matrix)

Date: _____ Proposal Defense Completed

Date: _____ Complete draft copies of dissertation sent to all committee members

Thesis/Dissertation Title: _____

DEFENSE DATE: _____ TIME: ____:____ AM PM

DEFENSE LOCATION: (Building and Room number) _____

ANTICIPATED GRADUATION DATE: Fall Spring December Year: _____

| Approve | Typed Name | Signature |
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NOTE: Thesis and dissertation defenses cannot be held unless all committee members are physically present. A request for an exception to this university requirement must be made in writing to the Associate Dean for Research and Graduate Education (and approved by the Associate Provost for Graduate Academic Affairs).

Information regarding electronic submission of dissertations is available from the WVU library: <https://etd.lib.wvu.edu/>