### APPLICATION FOR FINAL EXAMINATION

*(Thesis Defense)*

# Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Degree Sought:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Minor/Cognate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Foreign Language Required: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of Thesis/Dissertation:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Indicate whether [ ] First [ ] Second Examination.

Date of Examination:

Time:

 Place of Examination:

Recommending Approval:

## **Graduate Advisory Committee**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_N.A\_\_\_\_\_\_\_\_\_\_

*Member Member Member*

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

##  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

##  *GAC, Chairman*

 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Verified: Approved:

 **CATHERINE C. ARRADAZA ANABELLA B. TULIN**

 *Secretary, Graduate School* *Dean, Graduate School*

 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\* This application should be filed at OGS at least two (2) weeks before date of examination.*

*\* Attachments: (student research preliminary assessment certification/hard copy of manuscript/*

*Signed Approval Sheet Outline)*

***Distribution of copies****: Graduate School, Registrar, Major Department, Graduate Student*

**\* Indicate N/A or NONE for fields not applicable**