



**Request for Ph.D Oral Examination  
Graduate Studies & Bureau of Research  
Faculty of Education**

Student Name:

Student Number:

Student Email:

Proposed Date of Exam:

Proposed Time of Exam:

Title of Thesis:

Supervisor:

Committee Members:

Internal External:

Department of Internal External:

External:

University of External:

Department of External:

Research Website of External Examiner:

Do you require technical support? Please check one:

- YES (The Graduate Assistant will arrange for this ½ hour prior to exam)  
 NO, I do not require technical support

Professional Plans after Convocation:

Forwarding Address:

Please submit the completed request form to the Graduate Studies and Bureau of Research Office in A106 **a minimum of 30 working days** prior to the proposed date of the exam, only after you have discussed the details with your Examining Committee, and they have approved the arrangements.

**Please complete all required fields before submitting the form, since we will not be able to arrange the exam until all of the information is provided.**

Supervisor: \_\_\_\_\_ Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_