



# BROWN Graduate School *Forms*

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## DISSERTATION DEFENSE INFORMATION

STUDENT NAME: \_\_\_\_\_ SIS ID NUMBER: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

### PREVIOUS DEGREES

DEGREE \_\_\_\_\_ INSTITUTION \_\_\_\_\_ DATE AWARDED \_\_\_\_\_

DEGREE \_\_\_\_\_ INSTITUTION \_\_\_\_\_ DATE AWARDED \_\_\_\_\_

DEGREE \_\_\_\_\_ INSTITUTION \_\_\_\_\_ DATE AWARDED \_\_\_\_\_

DEFENSE DETAILS      DATE \_\_\_\_\_ TIME \_\_\_\_\_  
   BUILDING \_\_\_\_\_ ROOM \_\_\_\_\_

### EXACT TITLE OF DISSERTATION

### COMMITTEE

DIRECTOR \_\_\_\_\_ DEPARTMENT \_\_\_\_\_

READER \_\_\_\_\_ DEPARTMENT \_\_\_\_\_

READER \_\_\_\_\_ DEPARTMENT \_\_\_\_\_

READER \_\_\_\_\_ DEPARTMENT \_\_\_\_\_

### PRELIMINARY EXAMINATION

DATE PASSED \_\_\_\_\_

### LANGUAGE REQUIREMENTS

\_\_\_\_\_ DATE PASSED \_\_\_\_\_

\_\_\_\_\_ DATE PASSED \_\_\_\_\_

\_\_\_\_\_ DATE PASSED \_\_\_\_\_

### DEPARTMENTAL TEACHING REQUIREMENT

SATISFIED      NOT REQUIRED

### SUPERVISED RESEARCH REQUIREMENT

SATISFIED      NOT REQUIRED

\_\_\_\_\_  
Director of Graduate Study

\_\_\_\_\_  
Date