



PHD DEPARTMENTAL DEFENCE REQUEST FORM

- Students should ensure they have read the information on PhD Departmental Defence in the Graduate Department Handbook. All students are required to complete this form and return it to the Graduate Department of Kinesiology (grad.kpe@utoronto.ca /BN110) at least **four weeks** before the prospective PhD Departmental Defence date.

STUDENT NAME: _____ STUDENT #: _____

STUDENT EMAIL ADDRESS: _____

Please note that defences will only take place between 9-11:30 AM and 1:30-5 PM

THESIS TITLE: _____

DATE & TIME: _____ ROOM #: _____

EQUIPMENT: _____
(ie. TELECONFERENCE PHONE etc.)

SUPERVISORY COMMITTEE MEMBERS:

EMAIL ADDRESSES:

SUPERVISOR: _____

CO-SUPERVISOR: _____
(if applicable)

MEMBER: _____

MEMBER: _____

MEMBER: _____

NON-VOTING
MEMBER: _____
(if applicable)

SIGNATURES:

Student: _____

Date: _____

Supervisor: _____

Date: _____