



This form must be completed and submitted to GSAS by the department or doctoral program.

STUDENT NAME Last:	First:	Middle:
COLUMBIA (UNI) EMAIL ADDRESS:		STUDENT PID:
DOCTORAL PROGRAM: <input type="checkbox"/> ICLS		DIPLOMA ADDRESS*:
PROVISIONAL DISSERTATION TITLE:		

* Students must also enter this "Diploma Address" into SSOL, separate from all other addresses. This is where the diploma will be shipped.

For policies regarding the composition of the dissertation committee, see gsas.columbia.edu/defense-committees.

In the checkboxes on the right, indicate the committee members who are approved GSAS dissertation sponsors (a minimum of three is required). A complete list of approved sponsors is available at gsas.columbia.edu/dissertation-sponsors.

APPROVED SPONSORS

CHAIR OF EXAMINATION		Email:		X
		Phone:	UNI:	
	Department:			
DISSERTATION SPONSOR		Email:		X
		Phone:	UNI:	
	Department:			
THIRD EXAMINER (must be insider)		Email:		
		Phone:	UNI:	
	Department:			
<input type="checkbox"/> Remote participation for dissertation defense		<input type="checkbox"/> Mark here if third examiner is a co-sponsor		
FOURTH EXAMINER (insider or outsider)		Email:		
		Phone:	UNI (if applicable):	
	Department:			
<input type="checkbox"/> Remote participation for dissertation defense				
FIFTH EXAMINER (must be outsider)		Email:		
		Phone:	UNI (if applicable):	
	Department:			
<input type="checkbox"/> Remote participation for dissertation defense				

Final distribution of dissertation to committee will take place on:

DATE OF DISTRIBUTION: _____

I recommend this student for the dissertation defense and nominate the above-named examiners to the defense committee.

SIGNATURE OF CHAIR OR DIRECTOR OF GRADUATE STUDIES _____ PRINTED NAME AND TITLE _____ DATE _____

DEFENSE WILL TAKE PLACE ON:

Day of the week: _____ Date: _____ Time: _____ Room: _____

For GSAS use Intent Dist. reg. ZTXT Blue folder M.Phil. (date _____) COMM Notices emailed APPROVED _____ DATE _____