



This form must be completed and submitted to GSAS by the TC Office of Doctoral Studies.

STUDENT NAME Last:	First:	Middle:
M <input type="checkbox"/> F <input type="checkbox"/>	COLUMBIA (UNI) EMAIL ADDRESS:	STUDENT PID/ ID NUMBER:
DOCTORAL PROGRAM:	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: Phone: UNI: Department:	<input type="checkbox"/>
DISSERTATION SPONSOR	Email: Phone: UNI: Department:	<input checked="" type="checkbox"/>
THIRD EXAMINER (must be insider)	Email: Phone: UNI: Department: <input type="checkbox"/> Remote participation for dissertation defense	<input type="checkbox"/>
FOURTH EXAMINER (insider or outsider)	Email: Phone: UNI (if applicable): Department: <input type="checkbox"/> Remote participation for dissertation defense	<input type="checkbox"/>
FIFTH EXAMINER (must be outsider)	Email: Phone: UNI (if applicable): Department: <input type="checkbox"/> Remote participation for dissertation defense	<input type="checkbox"/>

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 DISSERTATION SPONSOR PRINTED NAME AND TITLE DATE

SIGNATURE OF TC OFFICE OF THE DEAN PRINTED NAME AND TITLE DATE

DEFENSE WILL TAKE PLACE ON:

Day of the week:	Date:	Time:	Room:
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For GSAS use	<input type="checkbox"/> Intent	<input type="checkbox"/> Dist. reg.	<input type="checkbox"/> ZTXT	<input type="checkbox"/> Blue folder	APPROVED _____	DATE _____
	<input type="checkbox"/> M.Phil. (date _____)	<input type="checkbox"/> COMM	<input type="checkbox"/> Notices emailed			