



# Defense Notice Form: Master's and Doctoral Students

**Please note:**

- Your main advisor must sign the form when a firm defense date, time, and location are determined by student and committee.
- Please turn one copy of this form in to the Graduate School, either by bringing the signed form to 235 Ashe Admin. Bldg. or by emailing the signed form to [grad.defense@miami.edu](mailto:grad.defense@miami.edu).
- Defense notice information will be posted on the Graduate School Web site, [grad.miami.edu](http://grad.miami.edu), in the "Events" section.

**To be completed by the student. Please type or print legibly.**

Student's Name \_\_\_\_\_

Student's C-Number \_\_\_\_\_ UM EMPL ID \_\_\_\_\_

Title of Thesis or Dissertation. Type or print legibly.

\_\_\_\_\_  
\_\_\_\_\_

Date of Defense \_\_\_\_\_  
(Month / Day / Year)

Time of Defense \_\_\_\_\_

Location of Defense \_\_\_\_\_  
(Building, Room Number, Campus)

**To be completed by the Chair.**

*(Note: Medical School graduate students should insert Mentor's name here.)*

\_\_\_\_\_  
*(Print name)*

\_\_\_\_\_  
*(Signature)*