

Approval Form for Final Oral Examination

Office of Doctoral Studies • 82 Washington Square East, 2nd Floor, NY, NY 10003-6680 • (212) 998-5044

Candidate Information

		N	
First Name		Last Name	
		ID Number	
Street Address		City	State Zip
		Telephone	
Department	Program	NYU Email Address	Other Email Address

Dissertation Title:

Consult our website for [deadline information](#) and final oral examination periods or contact the Office of Doctoral Studies. **Final oral examinations may be held only within the designated periods.** Indicate the agreed upon date and time below.

Date for Final Oral Examination

	Start Time	<input type="radio"/> am <input type="radio"/> pm	End Time	<input type="radio"/> am <input type="radio"/> pm
Final Oral Examination Date	Indicate a 2-hour time block beginning no earlier than 9:30 am and ending no later than 5:30 pm			

Dissertation Committee Instructions

Please sign indicating that you agree to the tentative Final Oral Examination date above. Your signatures also attest to your judgment that the student will submit a satisfactorily-completed dissertation by the following date: _____ This date must be no less than four weeks (exclusive of NYU breaks) prior to the examination date. The dissertation will then be distributed to the outside readers and the Final Oral Examination date and time will be confirmed.

NOTE: In the event that the dissertation is not prepared to the satisfaction of the dissertation committee by this date, it is understood that the committee will withdraw approval of the candidate's request for final oral exam. The candidate may then resubmit the approval form for a later deadline.

Chair Signature	Chair Name (print clearly or type)
Member Signature	Member Name (print clearly or type)
Member Signature	Member Name (print clearly or type)

Outside Reader Information

Two outside readers must be appointed to each final oral commission. Outside readers must be approved by the dissertation committee chair and must be full-time tenured or tenure-track members of the NYU faculty (exceptions must be approved by the Vice Dean for Academic Affairs in advance of their appointment).

		Has the reader agreed to the above date and time? <input type="checkbox"/> Yes <input type="checkbox"/> No
Outside Reader Name (print clearly or type)	School & Department	
		What format would the reader prefer for the dissertation copy? <input type="checkbox"/> electronic <input type="checkbox"/> hard copy <input type="checkbox"/> both
Office address for hard copy (if applicable)	Email address	

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