

## Doctoral Defense Schedule Form (Dissertation or Equivalent)

This completed form must be submitted to the Graduate College with the following items ten working days (usually two weeks, however, you must allow additional time for scheduled university holidays) before the scheduled oral defense:

1. One complete copy of the dissertation.

2. One Format Approval Sheet, signed by the committee chair.

3. One copy of the journal or style guide used for format (if you did not use APA, Chicago, MLA, or Turabian as a style guide).

Complete the attached *Survey of Eamed Doctorates*. (Complete instructions are available from the Graduate College, 480/965-3521 or online at http://graduate.asu.edu/forms)

Please print or type						
STUDENT NAME (LAST, FIRST, MIDDLE)  ASU			ASU I.D. NO. 1000733518			
			MAJOR Electrical Engineering			
PROPOSED EXAMII	NATION SCHEDULE					
Feb 4, 2011 TIME BUILDING BYENG					ROOM NUMBER	
SUPERVISORY COM	MITTEE					
NAME (D	r./Prof., first name, middle in	ACA	ACADEMIC UNIT			
CHAIR or CO-CHAIR Sethuraman Panchanathan			Computer Sci./E	Computer Sci./Electrical Eng.		
CO-CHAIR (if applicable)						
MEMBER Baoxin Li			Computer Sci./E	Computer Sci./Electrical Eng.		
MEMBER Gang Qian			Electrical Eng./A	Electrical Eng./AME		
MEMBER Michelle Shiota			Psychology	Psychology		
MEMBER John Black			Computer Sci.	Computer Sci.		
MEMBER						
foreign language exa dissertation defenses	dule a final oral defense of ms required and have filed are open to all members o ajor, and the date/time/loca	an approved Progra of the university com	m of Study with the Gradua nunity, and the university n	ate College. I understa nay publicize informat	and that doctor	
STUDENT SIGNATURE			DATE 12/15/10	DAYTIME PHONE NUMBER 480 326 6334		
ADDRESS (NO., STREET, APT.) 5005 W. Chicago Cir N			CITY, STATE, ZIP Chandler AZ 852	CITY, STATE, ZIP Chandler AZ 85226		
that the documen	upervisory Committee, t is ready for format ap	I recommend the	nt this defense be sche nse. All committee men	eduled as above an nbers have been n	nd verify otified and	
Jan	ne scheduled time.  C-CHAIR (only one signature is required	)		U10		
O BE COMPLETED	BY THE GRADUATE COL	LEGE				
Current enrollment Timelines Candidacy	☐ Exams ☐ Approved cor ☐ Survey of Ear		<ul><li>□ Program of Study</li><li>○ Name check</li><li>○ POS expiration check</li></ul>	☐ Format App ☐ Applied for sk		