

REGENT UNIVERSITY COLLEGE OF SCIENCE & TECHNOLOGY
FACULTY OF ENGINEERING, COMPUTING AND ALLIED SCIENCES (FECAS)

Department of Computing

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**Application to Defend Thesis
(2018)**

Candidate's Full Name:

Index No:

Thesis Title:.....

.....
...

Select **ONLY ONE** Preferred Defense Date (Check the Appropriate Box)*

May 2018	7 th	8 th	9 th	10 th	11 th
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*Selection is subject to change

Candidate's Signature: Date:

Candidate's Email: Phone #:

Approved By:

Supervisor's Name:

Supervisor's Signature: Date:

<i>Office Use Only</i>
Action of the Thesis Committee:
Date: