



This form must be completed and submitted to GSAS by the department or doctoral program.

STUDENT NAME Last:		First:		Middle:	
M <input type="checkbox"/>	F <input type="checkbox"/>	COLUMBIA (UNI) EMAIL ADDRESS:		STUDENT PID:	
DOCTORAL PROGRAM:				<input type="checkbox"/> ICLS	
PROVISIONAL DISSERTATION TITLE:				DIPLOMA ADDRESS*:	

* 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:		<input type="checkbox"/>
		Phone:	UNI:	
	Department:			
DISSERTATION SPONSOR		Email:		<input checked="" type="checkbox"/>
		Phone:	UNI:	
	Department:			
THIRD EXAMINER (must be insider)		Email:		<input type="checkbox"/>
		Phone:	UNI:	
	Department:			
	<input type="checkbox"/> Remote participation for dissertation defense		<input type="checkbox"/> Third examiner is a dissertation co-sponsor	
FOURTH EXAMINER (insider or outsider)		Email:		<input type="checkbox"/>
		Phone:	UNI (if applicable):	
	Department:			
	<input type="checkbox"/> Remote participation for dissertation defense			
FIFTH EXAMINER (must be outsider)		Email:		<input type="checkbox"/>
		Phone:	UNI (if applicable):	
	Department:			
	<input type="checkbox"/> Remote participation for dissertation defense			

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 CHAIR OR DIRECTOR OF GRADUATE STUDIES _____ 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		