

 **IC-TUMS**

**Office of Vice Dean for Research Affairs**

**Readiness to Defend Form**

# To: TUMS Vice Dean for Educational Affairs & TUMS Vice Dean for Research Affairs

Regarding: Defense Session for

|  |  |
| --- | --- |
| Student’s Name: | Last Name: |
| Program: | School/Center: |
| Student Number: | Level: |

Greetings,

We hereby confirm that the above student has held the preliminary defense with the supervisors and advisors.

Enclosed we send you the completed ***Preliminary Defense Assessment Form***, along with the supervisor’s confirmation of the student’s readiness for defense, and a copy of the thesis for the jury.

The defense session will be held on . The thesis title, location and time of the defense meeting are as follows: Thesis Title:

………………………………………………………………………………………………………………………………………………

………………………………………………………………………………………………

Location:……………………………………………………………………………

Time: …………………………….

# Proposed members of the committee are as follows:

1- 2-

3- 4-

5- 6-

7- 8-

9- Department Rep (who was assigned by the School Council on………….): Dr.

**--------------------------------------------- -----------------------------------**

**School’s Vice Dean for Educational Affairs Department’s Head**

**Center’s Vice Dean for Research Affairs Center’s Head**