

University of North Dakota Graduate School
Twamley Hall, Room 414 -264 Centennial Drive, Stop 8178 - Grand Forks, ND 58202-8178
Phone (701) 777-2784; 1-800-CALL-UND (ext 2784) ; Fax (701) 777-3619

NOTICE OF MASTER'S THESIS DEFENSE

Date: _____

To: Graduate School Records (gailholweger@mail.und.nodak.edu)

Committee Chair: _____

Student: _____ EMPL ID # _____

Graduate Program: _____ Degree Sought: _____

Thesis Title: _____

This form along with the Preliminary Approval form must be submitted to the Graduate School at least **one week** prior to the scheduled oral examination date, which will be held on:

Date: _____

Time: _____

Building: _____

Room: _____