

INTERNATIONAL STUDIES ORAL EXAM SCHEDULING FORM

1. After your Papers or Thesis has/have been approved, determine with your committee the date and time of your Oral Exam. Complete this form, leaving the location blank.
2. Turn the completed form into the Graduate Program Advisor (GPA) in Thomson 116 or the the Office of Academic Services in Thomson 111.
3. The GPA will reserve a room if needed and notify you and your committee of the location. The GPA will prepare your file for the Oral Exam and give it to your committee members prior to the exam date.

4. **Student Name:** _____

E-mail: _____ **Phone:** _____

Committee Members:

| <u>Name</u> | <u>E-mail</u> | <u>Department</u> |
|-------------|---------------|-------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Title(s) of Papers or Thesis :

1. _____

2. _____

Foci of Concentration:

| <u>Focus Type (Circle One)</u> | <u>Specific Concentration</u> |
|--|-------------------------------|
| 1. <i>Professional Regional I.S. Field Focus</i> | _____ |
| 2. <i>Professional Regional I.S. Field Focus</i> | _____ |

Oral Exam Schedule:

Day of the Week: _____ Time of Day: _____
Date: _____ Location: _____