

**CHINA STUDIES
ORAL EXAM SCHEDULING FORM**

Process:

1. Complete this form and have Professor Bachman sign it.
2. Give the completed and signed form to the Office of Academic Services in Thomson Hall room 111.
3. Based on this signed form, OAS will schedule a room if needed, set up your file for the oral exam and see that the file is given to one of your committee members prior to the exam.

Student Name: _____

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

Committee Members:

<u>Name</u>	<u>E-mail</u>	<u>Department</u>
Chair: _____	_____	_____
_____	_____	_____
_____	_____	_____

Title of Paper(s) (*Please give exact titles*):

1. _____

2. _____

Oral Exam Schedule:

Day of the Week: _____ Time of Day: _____

Date: _____ Location: _____

Approved by David Bachman: _____