

**Request for the Announcement of Doctoral Dissertation Oral Defense  
(For DISSERTATION FINAL DEFENSE)**

Department of Human Development and  
Family Science  
University of Georgia

**Please submit this form to the Graduate Program Assistant at least 2 weeks before the scheduled exam date and AFTER the signed approval form for your portfolio has been filed with the Graduate Program Assistant.**

Student Name: \_\_\_\_\_

ID # (810): \_\_\_\_\_

Date that Signed Portfolio Approval Form was submitted to the Graduate Program Assistant:

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Exam Date: \_\_\_\_\_

Exam Start Time: \_\_\_\_\_

Location: \_\_\_\_\_

Title of Dissertation: \_\_\_\_\_

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Major Professor's Name: \_\_\_\_\_

Committee Members: \_\_\_\_\_

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