



GRADUATE SCHOOL

APPLICATION FOR THESIS/DISSERTATION PROPOSAL DEFENSE

_____ Date

DR. ALLEN U. BAUTISTA
Dean, Graduate School
URS Morong

Sir:

Respectfully informing your good office that Mr./Ms. _____ is a student under the program of _____ is ready to undergo ORAL DEFENSE of his/her thesis/dissertation entitled " _____".

_____ Research Professor

CERTIFICATION

I hereby certify that the above-named student is enrolled this ____ Semester/School year _____ - _____ and passed the comprehensive examination, thus, qualified for oral defense until _____.

_____ Registrar, Graduate School

Note: Failure to comply on the given period means re-enrollment.

The following professors agreed to serve as panel of oral examination on _____, _____ at _____.

Conforme:

Panel Members	Designation	Signature
1. _____	Expert	_____
2. _____	Expert	_____
3. _____	Expert	_____
4. _____	Critic Reader	_____
5. _____	Statistician	_____
6. _____	Documentor	_____

_____ Secretary, Graduate School