

**NEUROSCIENCE GRADUATE PROGRAM
FINAL DISSERTATION DEFENSE APPROVAL FORM**

After final committee review and approval of your complete dissertation, this form must be completed and submitted to the Neuroscience Program DGS **as soon as provisional approval is granted (but no less than 2 weeks before your defense date)**. Your Program Administrator will use this information to create your defense flyer.

| Dissertation Details | |
|---|--|
| Student Name | |
| Undergraduate Education (Degree, Major, School, Year) | |
| Title of Dissertation | |
| Date of Defense | |
| Time of Defense | |
| Location of Defense | |
| Zoom Link, Meeting Id and passcode (if applicable) | |

| Dissertation Committee | |
|------------------------|------|
| Role | Name |
| Advisor | |
| | |
| | |
| | |
| | |
| | |

Approvals:

Student _____
(Name) Signature Date

DGS _____
(Name) Signature Date