

# REQUEST FOR FINAL DOCTORAL EXAMINATION

(One typed original must be submitted to the Graduate School **three weeks prior** to examination date and by current semester deadline for graduation.)

## Student Information

Name: LSU ID: Department/School: Major: Minor: Exam Date: Time & Place: Has this Exam been Previously Scheduled?	<b>For Office Use Only</b>  <b>GPA:</b>  <b>CW:</b>  <b>TIME:</b>  <b>REG:</b>  <b>COM:</b>
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## Suggested Committee

Note: Doctoral committees must include two full members of the graduate faculty, including one from the major department. **All general exams will be assigned a dean's representative.** If you are including a member of Southern University's graduate faculty, indicate it with a (SU) after their name.

### Typed/Printed Names

Chair: _____	Minor Prof: _____
Dean Rep: _____	Member: _____
Member: _____	Member: _____

### Signatures

Committee Chair: \_\_\_\_\_

Chair, Head of Department, or Grad Advisor: \_\_\_\_\_

Graduate Dean: \_\_\_\_\_

## Title of Dissertation

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