

## **TEMPORARY - APPROVAL TO SCHEDULE FINAL EXAMINATION: DOCTORAL**

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**Submission instructions:** Complete this fillable form electronically. Signatures must be provided by the student's major professor and department head/graduate program director. Submit the completed form to the Graduate School at <a href="mailto:grad@ksu.edu">grad@ksu.edu</a>, using the subject line, "Doctoral Approval of Schedule Final Examination". **The completed form must be received by the Graduate School at least two weeks in advance of the examination.** 

Name:			Examination to be taken
K-State email:			Date:
Student WID:		Time:	
Degree Program:			Place:
College: AG AI	☐ AR ☐ AS ☐ BA ☐ ED	☐ EN ☐ HE ☐ TC ☐ VM	
Dissertation Title:			
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Major Professor	K-State Email	Signature	Date
Co-Major Professor	K-State Email	Signature	Date
Supervisory Committee Member	K-State Email		
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Supervisory Committee Member	K-State Email		
Dept Head/Grad Program Director	K-State Email	Signature	