Doctoral Program in Educational Leadership and Administration
REQUEST Date of Dissertation Defense

Form: EdD12

Candidate:_____ Cohort #___ Date Entered Program_____
Print name

Date of Request _____

Signatures indicate availability for Dissertation Defense on _____

_____ _____ (Dept.)
Signature (Committee Chair)

_____ _____ (Dept.)
Signature (Committee Co-Chair)

_____ _____ (Dept.)
Signature (Committee Member)

_____ (Candidate Signature) _____Date

_____ (Signature) _____ Date
Chair, Dept. of Educational Leadership