



# DOCTORAL ORAL EXAMINATION FORM

UNC Chemistry Graduate Studies

## Student Information

Name \_\_\_\_\_

PID \_\_\_\_\_

E-mail \_\_\_\_\_

Year of Entry \_\_\_\_\_ Division \_\_\_\_\_

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## Exam Information

Indicate Exam Type:

Preliminary Oral Exam

Working Dissertation Title:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Final Oral Exam

Dissertation Title:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Date \_\_\_\_\_

Time \_\_\_\_\_

Location \_\_\_\_\_

Have you reserved this location?  Yes  No

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Committee:

Chair \_\_\_\_\_

Advisor \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please submit this form to Chemistry Student Services no later than two weeks before the scheduled exam date.

Student Services will prepare the necessary paperwork and deliver it to the Committee Chair at least one business day before the exam.

Please Note: If a committee member is outside the UNC Chemistry Department, please specify department and/or school

Date \_\_\_\_\_