

*The University of Wisconsin – Madison  
The Graduate School*

**PHD FINAL DEFENSE COMMITTEE APPROVAL FORM**

Please submit at least four weeks prior to exam. Type or print clearly.

DATE: \_\_\_\_\_

STUDENT'S FULL NAME: (Last, First, Middle) \_\_\_\_\_

STUDENT'S E-MAIL ADDRESS: \_\_\_\_\_

STUDENT'S 10-DIGIT ID NUMBER: \_\_\_\_\_

STUDENT'S MAJOR: \_\_\_\_\_

STUDENT'S MINOR: \_\_\_\_\_

This form, signed by the advisor/major professor, should be uploaded to the online box system or returned to the **Graduate Student Services Office** (3182 Mechanical Engineering) at least **4 weeks before the final oral defense**. Upon submission, student should receive additional information related to electronically depositing dissertations and optional Graduate School Final Reviews.

If any changes are made in the membership of the committee, a revised final defense committee approval form must be submitted **before the defense**. Changes in dissertation title or date **do not** require a revised form. The committee must have two ISyE faculty members who have tenure home in ISyE.

**The following faculty members have agreed to serve on the Final PhD Defense Committee for the above named student:**

NAME (Last, First, Middle)	READER? (Indicate w/ x)	RANK (Professor, assistant professor, etc.)	DEPARTMENT MAJOR REPRESENTED (Department Name)
Advisor 1. _____	<b>X</b>	_____	<b><u>INDUSTRIAL ENGINEERING</u></b>
Advisor 2. _____	<b>X</b>	_____	<b><u>INDUSTRIAL ENGINEERING</u></b>
Advisor 3. _____	<b>X</b>	_____	_____
Advisor 4. _____	<b>X</b>	_____	_____
(Optional) 5. _____	<b>X</b>	_____	_____

PROPOSED DATE OF FINAL EXAM: \_\_\_\_\_

PROPOSED DISSERTATION TITLE: \_\_\_\_\_

SIGNATURE: ADVISOR/MAJOR PROFESSOR: \_\_\_\_\_

SIGNATURE: DEPARTMENT CHAIR: \_\_\_\_\_