



**Graduate Program in Civil Engineering
PhD Candidacy Examination Scheduling Request Form**

Student Name		Student ID	
Supervisor		Area of Specialization	
PhD Proposal Title			
First Term of Study		Expected Term of Completion	

Please List Examination Committee Members Below:

	Name	Department/University
Chair		
Member		
Member		
Member		
Member		
External Member (Optional)		
Contact Information for External Member		

	Date & Time	Room
Written Examination		
Oral Examination		

NOTE: If any multimedia equipment is required for the exam, students are responsible for making advanced booking arrangements.

Student's Signature		Date
Supervisor's Signature		Date
Associate Chair's Signature		Date