

MS Thesis Date/Time Request

Once you make this request, the Grad. Coordinator will send out official memo to your committee.

				Student Name:
	Ēmail:			Student CUID #:
	Other:		Computer Engineering Electrical Engineering	Master of Science:
				Focus Area:
				Title of Defense:
				Graduation Term:
				Committee Chair:
AMRL Charleston Campus Conf. Room Other		EIB 300 Conf. Room	Riggs 100A (40 VTC Avialable) Riggs 217 (12) Riggs 303A (12)	Room Preference: *Subject to change based on availability.
Charleston Campus Conf. Room			VTC Avialable) Riggs 217 (12) Riggs 303A	*Subject to change

April 11, 2025.

Time of Defense: 1 hour minimum (example 1:00-2:00pm

Anything else to note:

Email this form to Jennifer Gooch: jdgooch@clemson.edu

^{**} Students are required to have a GS-2 form approved at the time the MS Thesis Examination Signup Form is submitted. It is up to the student to create a calendar event for committee as well as the Zoom access.