Center For Advanced Studies in Engineering

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Thesis Defense Request

CASE Roll No: _____

Name: _____
First Middle Last

Tel. No: _____

Semester: ❑Spring ❑ Summer ❑Fall 20__

Program
❑ M.Sc.
❑ Ph.D.

Department
❑ Computer Engineering
❑ Engineering Management

Title: _____

Abstract:

Student Signature: _____ Date: _____

Advisor's Signature: _____ Date: _____
Name: _____

Thesis Defense:

Time: _____ Date: _____ Venue**:** _____

For office use only

Received by: _____ Date: _____

Manager Operations: _____ Date: _____

Examination Deptt. _____ Date: _____

Academics: _____ Intimation sent to UET on: _____

Thesis Defense Request

Name: _____ CASE Roll #: _____

Time: _____ Date: _____ Received By: _____

Venue: _____ Date: _____