THESIS/PROJECT PRESENTATION (DEFENSE)
ROOM/EQUIPMENT RESERVATION FORM

Please book your room with the date and time and equipment needed with Lynda Stanbrough at the OSN front window 30-60 days prior to your Thesis/Project Presentation (Defense).

Student Name __________________________________________________________

Thesis/Project Chair ____________________________

Date of Thesis/Project presentation (Defense) ________________

Time of Thesis/Project presentation (Defense) ________________

Room Preference (Check One)*
*Lynda Stanbrough will verify if room is available when turning in form

Mildred Harmon Conference Room-OSN 222 _________

OSN 101 __________

OSN 107 A _________

Equipment Needed (Check One)
(IF EQUIPMENT IS NOT CHECKED, WE CANNOT GUARANTEE AVAILABILITY)

SMART CART ___________ (Student is responsible for operation of SmartCart)

OTHER (Please specify) ______________________________________________

__________________________________________  ______________________________
Signature of Student    Signature of Chair

kc/5/05
ThesisDef.Form