**ORALS APPLICATION FORM**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ @columbia.edu

*\*Instructions for students:*

* *Please use this form as a cover sheet and attach it to a copy of your orals proposal and reading lists.*
* *After obtaining signatures from each of your committee members, please submit your materials to the Graduate Studies Coordinator in 602 Philosophy Hall. They will be collected for Director of Graduate Studies, to review and sign.*
* *Please note that all oral exams should take place by May 1st of your third year.*

**ORALS COMMITTEE**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **NAME** (please print) | **SIGNATURE** | **EMAIL** |
| Major Field |  |  | @columbia.edu |
| Major Field |  |  | @columbia.edu |
| Minor Field I |  |  | @columbia.edu |
| Minor Field II |  |  | @columbia.edu |

**DGS APPROVAL**

DGS Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date submitted [for office use only]: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_