

Orals Scheduling Form

*Department of East Asian Languages and Cultures
Columbia University*

STUDENT INFORMATION

Student Name _____

Email _____

Advisor Name _____

Email _____

EXAMINATION INFORMATION

Day _____

Time _____

Location _____

EXAMINING COMMITTEE

1. Name _____

Email _____

2. Name _____

Email _____

3. Name _____

Email _____

4. Name _____

Email _____

NOTES