

To: Web Coordinator
From: Committee Chair/Major Advisor

**GEORGIA STATE UNIVERSITY
BYRDINE F. LEWIS COLLEGE OF NURSING AND HEALTH
PROFESSIONS
Dissertation Defense or Capstone Announcement**

Student Name	Date	Time	Place
Title of the Study			
Dissertation Committee Member	Department	College	
Dissertation Committee Member	Department	College	
Dissertation Committee Member	Department	College	
Dissertation Committee Member	Department	College	
Major Advisor	Signature	Date	
Doctoral Program Coordinator	Signature	Date	

ABSTRACT

[Original form may be obtained from Office of Records and Information or the Byrdine F. Lewis College of Nursing website]

This form should be sent to web announcement link upon receiving all signatures.