



**WISCONSIN**  
UNIVERSITY OF WISCONSIN-MADISON

**NAME**

PhD Dissertation Defense

Your Picture

Advised by: Optional

**“Dissertation Title”**

**Month Day, Year**  
at **Time US Central Time**

**Building Name**  
Room Number  
Address (Optional)

In-person event with a virtual option link :

For any questions and requests related to the event,  
please email **Name** directly: **Email**