



Thesis Approval Form

Candidate's Name: _____ Banner ID _____

Degree/Program: _____

Thesis Title: _____

College: _____

Department: _____

PART A: The candidate has successfully defended his/her Thesis.

Committee Chair (<i>Print name</i>)	Signature	Date
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Committee Member (<i>Print name</i>)	Signature	Date
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Committee Member (<i>Print name</i>)	Signature	Date
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Committee Member (<i>Print name</i>) – Optional	Signature	Date
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Committee Member (<i>Print name</i>) – Optional	Signature	Date
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PART B: The content of the Thesis has been evaluated and reviewed to ensure that the Thesis meets or exceeds the standards for the degree, and exemplifies a meaningful contribution to scholarship in its respective field.

Committee Chair (<i>Print name</i>)	Signature	Date
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PART C: The Thesis satisfies the formatting standards of the Thesis and Dissertation Manual.

Graduate Research Specialist (<i>Print name</i>)	Signature	Date
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PART D: The submission of the Thesis is approved by the Vice President for Research.

Vice President for Research (<i>Print name</i>)	Signature	Date
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