



Transmittal & Certification of Satisfactory Completion of Master's Thesis

The attached thesis submitted by _____ entitled

_____ is certified to meet program and university requirements for the Master's Degree in

_____ My signature below indicates that I have read and carefully examined this thesis and agree that this thesis meets the requirements of the program in _____

for an _____ degree.

Please do not sign until the signature above yours has been obtained.

- 1. Thesis Advisor _____ Date _____
- 2. Graduate Program Director _____ Date _____
- 3. Department Chair _____ Date _____
- 4. Dean of College _____ Date _____
- 5. Library Representative _____ Date _____

When all signatures have been obtained return this form to the Office of Admissions, Cook Admin 126.

- 6. Received by _____ on _____