

To: Dr. Patrice Gilliam-Johnson, Dean, School of Graduate, Adult and Extended Studies

The members of the Committee approved the Thesis of _____
Candidate's Name
as presented on _____ .
Date

We recommend that it be accepted in partial fulfillment of the requirements for the degree
_____ in _____
Degree Name Major/Program Name

Advisor Department Date

Member Department Date

Member Department Date

External Member Affiliation Date

Approved

Department Chairperson or Designee Department Date

Academic Dean or Designee College Date

Date
Dean, School of Graduate Studies & Research or Designee