



## 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.

**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 \_\_\_\_\_

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

5. Received by \_\_\_\_\_ on \_\_\_\_\_