



Title of Masters thesis (if applicable) \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Advisory Committee Signatures

\_\_\_\_\_  
Chairperson

\_\_\_\_\_  
Department or Curriculum

\_\_\_\_\_  
Minor Representative

\_\_\_\_\_  
Minor Department or Curriculum

\_\_\_\_\_  
Committee Member

\_\_\_\_\_  
Department or Curriculum

\_\_\_\_\_  
Committee Member

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Department or Curriculum

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Committee Member

\_\_\_\_\_  
Department or Curriculum

Approved by Department or Curriculum Chairperson \_\_\_\_\_

Approved by the Office of the Dean, Assistant Dean \_\_\_\_\_

Date \_\_\_\_\_

\*\* Please attach Transfer of Credit Form (G112) for courses to be transferred.