

Thesis/Project/Dissertation Committee Certification

Name: _____ Phone Number: _____

Coyote ID #: _____ Program: _____

Thesis/Project/Dissertation Title: _____

The copy of your manuscript being submitted for format review must have been approved by your committee and must be complete in content. There should be no content changes after you have submitted it for format review. If your manuscript is found to be incomplete, it will be returned to you unreviewed.

I have read the above statements and understand the requirements for submission of my manuscript for format review.

Signature

Date

This form must be signed by all members of your thesis/project/dissertation committee.

"I certify that the thesis/project/dissertation of the student listed above is complete in content and is ready to be reviewed for format by the Office of Graduate Studies."

Committee Chair (Printed Name)

Signature

Date

Reader #2 (Printed Name)

Signature

Date

Reader #3 (Printed Name)

Signature

Date

Reader #4 (Printed Name)

Signature

Date

Graduate Coordinator (Printed Name)

Signature

Date

*Department Chair (Printed Name)

Signature

Date

**Some programs require the signature of the Department Chair or Graduate Coordinator. Please check with the program office or Graduate Studies for required signatures.*

Please Note: *The Office of Graduate Studies does not endorse or promote the use of professional thesis/project/dissertation formatters. The University offers free and substantial resources to students who need formatting assistance.*

Graduate Studies Approval: _____