Approval of Dissertation/Thesis/Project

Approval For: □

Form Initiator Role: □

First Name: □ Last Name: □ Student ID: □

Email: □ Phone: □

Degree: □ Major: □ Concentration: □

(English, Physics, Geoscience, etc.) (Geology, Native Arts, etc.)

Did you work with humans or animals? □

Embargo Requested? □

THESIS/DISSERTATION/PROJECT TITLE (This title must match the title on your Title Page)

Please enter contact information below for the required form approvers.

Committee Chair/Co-Chair
First Name: □ Last Name: □ Email: □

Department Chair
First Name: □ Last Name: □ Email: □

Graduate Coordinator
First Name: □ Last Name: □ Email: □

Graduate Coordinator Comments:

Committee Chair/Co-Chair Signature Date

First Name: □ Last Name: □ UA ID: □

Committee Chair/Co-Chair Signature Date