

GEORGIA INSTITUTE OF TECHNOLOGY
Office of Graduate Studies & Research

CERTIFICATE OF THESIS APPROVAL FOR DOCTORAL STUDENTS

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We, the below signed, hereby state our full approval of the thesis submitted by the above student in partial fulfillment of the requirements for the degree of Doctor of Philosophy in the School/College of _____.

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Thesis Advisor	Print last name & dept.	Member, Reading Committee	Print last name & dept.
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The above named student has completed all departmental requirements and oral presentation.

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* * * * *

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The Georgia Tech Graduate Office has received the above dissertation and appropriate forms.

Signature_____
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