



Dissertation and Doctoral Project Completion Sign-Off

This form is not approved until ALL signatures have been obtained.
Submit to the College of Graduate Studies at the address below.

TYPE or PRINT CLEARLY

Name: _____ Student ID#: _____

Contact Information: _____
Email Phone

Department: _____ Program: _____
(Give the exact title of the program as printed in the *Graduate Bulletin*)

This document has been completed in partial fulfillment of the requirements for the following degree (check one):
 DPT PhD AuD EdD DHA

Project Title: _____

Committee Chair: _____
Print Name

Faculty Member: _____
Print Name

Faculty Member: _____
Print Name

Faculty Member: _____
Print Name

Defended and Approved/Accepted on: _____
Date

Research involving the groups listed below require approval from the appropriate committee:

- Human Subjects: Institutional Review Board (IRB)
- Animals: Institutional Animal Care & Use Committee (IACUC)
- Recombinant DNA: Institutional Biosafety Committee (IBC) approval

Research did not involve human subjects, animals, or recombinant DNA

Human Subjects
 Yes _____
Approval Date

Animals
 Yes _____
Approval Date

Recombinant DNA
 Yes _____
Approval Date

Department Chairperson: _____
Signature Print Name Date

Distribution: College of Graduate Studies, Department Chair, Student (11/07)