



RSMAS Certificate of Approval of Master's Thesis

Must be submitted with ETD email approval from Associate Director of Programs.

To be completed by the student.

Author's Name: _____ Author's ID#: _____

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Title of Thesis *The title needs to be legible. This information is used for your official transcript.*

To be completed by Committee Members.

Committee Chairperson Name (Print) Signature Date

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To be completed by Ex-Officio Committee Member

**Dr. Sharan Majumdar,
RSMAS Associate Dean for Graduate Studies**

Signature _____ Date _____



To be completed by Associate Director of Programs.

This project has been examined and found to be complete and suitable for upload in the Scholarly Repository.

Signature _____ Date _____