Office of Graduate and Professional Studies



WRITTEN DISSERTATION (Ph.D., Dr.PH) OR RECORD OF STUDY (Ed.D, D.En.) APPROVAL FORM

Student's Name:	t records)			
Degree (check one):	Ph.D. (Dissertation)	Dr. PH. (Disser	tation)	
	Ed.D. (Record of Study)	DE.n. (Record	of Study)	
Date of Defense: (mm/dd/yy or	r Exempt): Toda	y's Date (<i>mm/dd/yy</i>):		
Anticipated Date of Graduation	n (Month Year):	_		
Dissertation or Record of Stud	y Title:			
and quality as a dissertation or to be submitted to OGAPS for committee with at most one dis	pointed committee have read and examined record of study for this doctoral degree and a processing and acceptance, OR we indicate seension is required to pass. Special Appoint a this form. The Department Head signature	indicate our approval of the te our dissent below. A vo tments are not required to	e content of the document ote by all members of the	
 Chair:				
Student Contact Information	n:			
UIN		Student's Email Address		

The student must submit this signed approval form to OGAPS for approval and upload the final PDF version of the dissertation or record of study to etd.tamu.edu by the published deadline for the semester. To graduate in a given semester, a student must meet the scheduled deadline for submittal of the signed approval form and the dissertation or record of study in final form. Students must clear Thesis and Dissertation Services within a year of their final defense. The Office of Graduate and Professional Studies posts a calendar for each semester, and these dates must be observed.

PLEASE TAKE THIS ORIGINAL SIGNED APPROVAL FORM TO THESIS AND DISSERTATION SERVICES.

Jack K. Williams Administration Building – Room 112