



The undersigned certify that they have read the Master's Thesis/Practicum entitled:

submitted by

in partial fulfillment of the requirements for the degree of

The Thesis/Practicum Examining Committee certifies that the thesis/practicum (and oral examination if required) is:

(Approved or Not Approved)

Thesis

Practicum

Name/Unit: _____
(advisor)

Signature: _____

(Advisory Committee member)

(Advisory Committee member)

(Advisory Committee member)

Date: _____

