

# Thesis Draft Approval / Notification of Final Masters' Examination

Student's Name \_\_\_\_\_

Area of Specialization \_\_\_\_\_

Thesis Title \_\_\_\_\_

This form acknowledges that the final thesis draft has been submitted to all committee members at least two weeks prior to the scheduled final masters' examination.

Date draft submitted to committee \_\_\_\_\_

Date of Final Masters' Exam / Exit Seminar \_\_\_\_\_ Time \_\_\_\_\_

Location of Exit Seminar \_\_\_\_\_

## Committee Members

Office use only

<b>Advisor</b>			
Print Name _____	Signature _____	M or P Status	Graduate Program
<b>Committee Member</b>			
Print Name _____	Signature _____	M or P Status	Graduate Program
<b>Committee Member</b>			
Print Name _____	Signature _____	M or P Status	Graduate Program
<b>Additional Committee Member</b>			
Print Name _____	Signature _____	M or P Status	Graduate Program

Date submitted to GSC \_\_\_\_\_

\_\_\_\_\_  
Chair, ENR Graduate Studies Committee

\_\_\_\_\_  
Date



**THE OHIO STATE UNIVERSITY**  
COLLEGE OF FOOD, AGRICULTURAL,  
AND ENVIRONMENTAL SCIENCES

School of Environment and Natural Resources