

College of Graduate & Professional Studies (CGPS) - Indiana State University
Approval of Non-Thesis or Non-Dissertation Culminating Experience

Degree? Masters Doctorate Date of completion:

Student Name: Student ID:

Type of culminating experience:

1. The Committee members certify that the student has successfully completed a culminating experience that meets program standards. * Only the Committee Chair (i.e. Advisor) signs in programs that do not require multiple committee members.

Committee Chair or Advisor: Date:

Signature:

Committee Member: Date:

Signature:

Committee Member: Date:

Signature:

Committee Member: Date:

Signature:

Committee Member: Date:

Signature:

Committee Member: Date:

Signature:

2. The Department Chair or Representative certifies that the responsibilities of the Committee Chair, Committee, and Student have been met.

Department Chair or Representative: Date:

Signature:

3. The College Dean or Representative certifies that the culminating experience meets the requirements of their College.

College Dean or Representative: Date:

Signature:

4. The CGPS Dean or Representative certifies that the culminating experience meets the requirements of the CGPS.

CGPS Dean or Representative: Date:

Signature: