

Brandeis University
Graduate School of Arts and Sciences

Certification of Master's Thesis Acceptance

_____, a candidate for a Master's Degree in _____
(Print) Student's Name *Department/Program*

has successfully completed the Master's Thesis entitled:

which requires no additional revisions and has been reviewed and approved by:

_____ <i>Thesis Advisor signature</i>	_____ <i>Printed Name</i>	_____ <i>Date</i>
_____ <i>Second Reader signature (if applicable)</i>	_____ <i>Printed Name</i>	_____ <i>Date</i>
_____ <i>Graduate Chair signature</i>	_____ <i>Printed Name</i>	_____ <i>Date</i>

Anticipated Graduation: August 20__ February 20__ May 20__

Other Committee Members (if applicable):

By Submission deadline (refer to dates in Academic Calendar):

- (1) This form must be signed by both Graduate Chair and Thesis Advisor (even if it is the same individual) and returned to Richard Cunnane (rcunnane@brandeis.edu) at least one day prior to submission deadline.
- (2) Thesis must be electronically deposited by submission deadline.