



Division of Mathematics & Applied Sciences  
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<b>Student Name</b>	<b>Student ID #</b>	<b>Birth Date</b>
<b>Address</b>		
<b>Date of Graduation</b>	<b>Date of Thesis Defense or Oral Exam</b>	
<b>Title of Thesis or List of Courses to be Examined</b>		
<b>Thesis or Oral Exam Committee Chair</b>		
<i>Printed Name</i>	<i>Signature</i>	<i>Date</i>
<b>Thesis or Oral Exam Committee Members (minimum of 3 including chair)</b>		
<i>Printed Name</i>	<i>Signature</i>	<i>Date</i>
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<i>Printed Name</i>	<i>Signature</i>	<i>Date</i>
<b>Graduate Advisor</b>		
<i>Printed Name</i>	<i>Signature</i>	<i>Date</i>

The semi-final version of the thesis is due to the committee for review  
at least one week in advance of the defense.

11/2012