

## Master's Thesis Signature Form

Name: \_\_\_\_\_

Year of Graduation: \_\_\_\_\_

Title of Thesis: \_\_\_\_\_

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We, the undersigned, hereby certify the attached Master's Thesis has been examined and approved. Permission is hereby granted to submit this work in its final format for permanent placement in Thorndike Library and the College of the Atlantic Archives.

Committee Chair: \_\_\_\_\_  
Print Name Signature Date

Committee Member: \_\_\_\_\_  
Print Name Signature Date

Committee Member: \_\_\_\_\_  
Print Name Signature Date

Graduate Director: \_\_\_\_\_  
Print Name Signature Date

By signing below, I attest that that this work is my original creation, that copyright for the work has not been assigned to another party, and that I am the sole owner of the work thereof and all rights, title and interest therein.

Graduating Student: \_\_\_\_\_  
Print Name Signature Date

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Archivist: \_\_\_\_\_  
Print Name Signature Date

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