



Thesis Revisions Approval Form Master's

Student's Name: _____

Student No: _____

This form indicates that all required thesis revisions as determined by the examination board have been completed satisfactorily and the thesis can now be deposited. Only those examination board members charged with overseeing the thesis revisions need to complete this form

	Role	Name	Signature
<input checked="" type="checkbox"/>	Thesis Supervisor		
<input checked="" type="checkbox"/>	Thesis Co-Supervisor		
<input type="checkbox"/>	Internal Examiner		
<input type="checkbox"/>	Member of Joint Institute		
<input type="checkbox"/>	Member of Department		