

## College of Graduate Studies VERIFICATION OF Ed.D. Dissertation

We, the Graduate Con	nmittee, hereby	certify that:		
Student Name:			Student ID: <u>A</u>	
Has successfully (plea	se check all tha	t apply):		
Completed a dissertation Passed the exit exam				
Title of dissertation: _				
Leading to the degree of: Major of:				
Concentration of: Specialization			f:	
This certifies that the	above candidat	e satisfactorily completed th	e above requirement as of	Date
Certified by Examining Committee and Graduate Coordinator				
Major Professor:	Signature		Date	-
Second Professor:	Signature		Date	-
Third Professor:	Signature		Date	-
Fourth Member:	Signature		Date	-
Graduate Coordinator: Printed Name				
	Signature _		Date	-
Certified by College Deans				
Dean, College of Education			Date	-
Dean, College of Graduate Studies			Date	-