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Preliminary Approval of Thesis/Dissertation

Date: _____

To: Dean of Graduate School

I, the undersigned, report that the draft of the thesis/dissertation of

_____ is acceptable.

Student's Name & ID Number

Major Professor(s)

Assistant /Associate Dean of Graduate School

(Dean of Graduate School)

NOTE:

1. The **Major Professor(s)**, with the collaboration of the members of the student's **Advisory Committee**, is expected to examine the thesis/dissertation in every detail. The signature of the **Major Professors** indicates approval of the draft.
2. The signature of the Assistant/Associate **Dean of the Graduate School** indicates that a copy of the draft has been inspected by the **Graduate School** and that the student has been informed of the **instructions for the format and other specifications**. After the approval by the **Dean of Graduate School**, the student is eligible to take his/her **Final Oral Examination**.

SPECIAL NOTE:

After the Final Oral Examination, the Student May be required to do additional work on the thesis/dissertation or make other corrections before the submission of the final version.