



UNIVERSITY of MARYLAND  
EASTERN SHORE

DIVISION of ACADEMIC AFFAIRS  
*School of Graduate Studies*

***THESIS SIGNATURE APPROVAL SHEET***

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

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Degree Candidate: \_\_\_\_\_

Thesis and Abstract Approved  
by Advisor: \_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Department

\*Signature of Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

Advisory Committee:

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

Department: \_\_\_\_\_

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

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*\* By his/her signature, the advisor attests that the thesis is complete, that all changes recommended by the advisory committee members have been made, and that the thesis is satisfactory in all technical and editorial matters.*