

STEPHEN F. AUSTIN STATE UNIVERSITY
Arthur Temple College of Forestry & Agriculture
Report of Thesis Examination

Name _____

SID _____

Title of Thesis _____

Examination of the above student on the thesis title indicated above was held at
_____ o'clock on _____
(date)

In the opinion of members of the examining committee, the student's thesis examination has been completed satisfactorily or unsatisfactorily as indicated in the column in which each member of the committee has signed below.

SATISFACTORILY

UNSATISFACTORILY

As the Major Professor of the above named student, and as chairman of the examining committee, I certify that the student has _____
satisfactorily unsatisfactorily
completed all the requirements with respect to the thesis examination.

Major Professor Date

Approved by:

Graduate School Rep. Date

Associate Dean (ATCOFA) Date

Dean (ATCOFA) Date

Dean of the Graduate School Date