

University of Maryland School of Graduate Studies

## Certification of Completion of the Master's Thesis \*

Date:

To: Associate Dean of the School of Graduate Studies

From: (thesis committee chair) (program)

The undersigned members of the student's thesis committee hereby certify that the thesis written by:

Student's Name: (last) (first)

Student ID Number: @

entitled:

is ready for defense.

Signatures:

Thesis Committee Chair: (date)

Thesis Reader 1: (date)

Thesis Reader 2: (date)

Graduate Program Director: (date)

Date of Final Examination\*: (month) (day) (year)

*\*The examination committee must have sufficient time to review the thesis and return the form to the School of Graduate Studies at least two weeks (10 working days) before the examination.*

*Updated: April 2026*