

MEMORANDUM

DATE:

TO: Leslie D. Frazier, Ph.D., Director of Graduate Studies, Department of Psychology

FROM: *Student's name, PID, Graduate Program*

RE: Successful completion of the thesis project and thesis requirements

Student's name, PID, upon **his/her** defense on *date* has officially met all the requirements in the Department of Psychology for successful completion of a Master's Thesis in Psychology. This memo shall serve as official confirmation to the Registrar's Office to award the Degree of Master's of Science.

Thesis Title: _____

The following faculty served on the committee and by their signatures below, indicate that the Thesis project has met their satisfaction:

Major Professor (name typed and signature) _____
Date

Member (name typed and signature) _____
Date

Member (name typed and signature) _____
Date

Member (name typed and signature) _____
Date

**Students must attach unofficial transcript or panther degree audit to demonstrate good academic standing and coursework counted towards Masters degree

**Students must attach a full copy of the approved/revised Master's Thesis

I attest that I have read and verify that this thesis meets the standards of quality and the student has met the full requirements of the Department of Psychology for a Master's of Science.

Dr. Leslie D. Frazier _____
Date
Director of Graduate Studies
Department of Psychology