

DISSERTATION APPROVAL FORM
DOCTOR OF INDUSTRIAL TECHNOLOGY
UNIVERSITY OF NORTHERN IOWA

1. Student Name _____ 2. Major Code _____

3. Student Number _____ 4. Anticipated Graduation Date _____

5. Dissertation Title _____

6. Dissertation Committee Approval Signatures: (Type each committee member's name below their signature line)

Advisor: _____ Date _____

Co-Advisor, if applicable: _____ Date _____

Committee member: _____ Date _____

Committee member: _____ Date _____

Committee member: _____ Date _____

Committee member: _____ Date _____

7. Dissertation approved by the Coordinator of Graduate Studies, Department of Technology

Coordinator _____ Date _____

8. Dissertation approved by the Department Head, Department of Technology

Department Head _____ Date _____

9. All dissertation materials have been submitted and are approved by the Graduate Dean

Graduate Dean _____ Date _____

Upon final approval, the Graduate College will send this completed form to the Registrar's Office, with photocopies to the student and the Department of Technology.