SJD
SUPERVISED DISSERTATION (890)
REGISTRATION AUTHORIZATION

STUDENT: ________________________________________________________
(PRINT LEGIBLY!)

DISSERTATION TOPIC/TITLE: ________________________________________
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_________________________________________________________________
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FINAL GRADE MODE:
LETTER GRADE ________ OR PASS/FAIL _________

DISSERTATION ADVISOR: ____________________________________________

SEMESTER ENTERED SJD PROGRAM: ____________________________ 20_____

THE ABOVE NAMED STUDENT IS AUTHORIZED TO REGISTER FOR THE
SJD SUPERVISED DISSERTATION UNDER MY SUPERVISION.

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DISSERTATION ADVISOR SIGNATURE

ANY CHANGES REGARDING DISSERTATION TOPIC/TITLE,
GRADE MODE, OR ADVISOR WILL REQUIRE SUBMISSION
OF A SUBSEQUENT REVISED FORM.

RETURN THIS COMPLETED FORM
TO THE REGISTRAR’S OFFICE.