

CERTIFICATION OF COMPLETION OF DOCTORAL PROJECT

This form must be submitted by the final deadline established by
the Graduate College for the graduation semester.

Date Approved _____

Student's name _____ Student ID _____

Degree sought _____ Dept. _____

Graduation date: _____

Note: Per the Graduate Catalog, students who have successfully completed all the requirements for their degree will be required to graduate in the term during which they satisfy such requirements. For additional information, please visit the General Graduation Information of the Student Policies Publication: <https://www.utrgv.edu/academics/catalogs/index.htm>

Doctoral Project Title:

The Doctoral Project listed above has been read and reviewed in its entirety, with all final corrections complete and approved by the committee chair and members, and is ready for publication.

NAME OF COMMITTEE CHAIR (TYPE) SIGNATURE

NAME OF COMMITTEE MEMBER (TYPE) SIGNATURE

NAME OF COMMITTEE MEMBER (TYPE) SIGNATURE

NAME OF COMMITTEE MEMBER (TYPE) SIGNATURE

Please submit the signed copy to the Graduate College or send it to ETD@utrgv.edu by no later than
the final doctoral project deadline. For questions, contact: ETD@utrgv.edu.