

M-FORM / Form verifying completion of graduate program requirements for:

MASTER'S degrees w/THESIS and ALL PH.D. degrees

FOR DEGREE CONFERRAL ON: February 1, 20 _____ June 15, 20 _____ September 1, 20 _____

M-form due date: <http://grad.buffalo.edu/Academics/Academic-Deadlines.html>

STUDENT NAME: _____ UB Person # _____

1) PROGRAM REQUIREMENTS: I have examined the UB TRANSCRIPT and department record of the above-named student and confirm that (s)he has completed **ALL PROGRAM AND DEPARTMENTAL REQUIREMENTS** for the:

(degree type) _____ in (program title) _____

in the Dept. of _____.

Dir. of Grad. Studies/Chair _____
Name Signature date

2) THESIS/DISSERTATION DEFENSE: WE CERTIFY THAT ON (date) _____, the above student successfully defended his/her Master's thesis/Doctoral dissertation.

Major Professor Name Signature date

Committee Member Name Signature date

Committee Member Name Signature date

Committee Member (optional) Name Signature date

3) STUDENT ATTESTATION OF THESIS/DISSERTATION ORIGINALITY AND INTEGRITY: With my signature below, I attest to the originality and integrity of the Master's thesis/Ph.D. dissertation that I have submitted to my professor and committee for final review and approval. All work therein is original or properly attributed and cited.

Student's Name Signature date

4) FACULTY ACCEPTANCE OF FINAL THESIS/DISSERTATION DOCUMENT: On (date) _____, I received the above-named student's **FINAL THESIS/DISSERTATION**. I certify that this document, including revisions since its defense, has been fully examined and approved by myself and all committee members. We deem it acceptable for final submission to the Graduate School, in fulfillment of the requirements for the degree indicated above, in section 1.

TITLE OF FINAL THESIS/DISSERTATION:

Major Professor _____
Name Signature date

Dir. of Grad. Studies/Chair _____
Name Signature date