



College of Graduate Studies and Research

MINNESOTA STATE UNIVERSITY, MANKATO

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Candidate's Name: _____ Tech ID: _____

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1. Admitted to candidacy _____ (date)
2. Dissertation or other research activity submitted and approved _____ (date)
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Advisor/Chair of Committee Signature

Print Name

Date

Committee Member Signature

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Date

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Department Graduate Coordinator Signature

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Dean, College of Graduate Studies

Date



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