

**Thesis Approval**  
The Graduate School  
Southern Illinois University

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*Date of Approval*

I hereby recommend that the thesis prepared under my supervision by

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*Student Name*

Entitled

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be accepted in partial fulfillment of the requirements for the

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*In Charge of Thesis*

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*Head of Department*

Recommendation concurred in

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Committee  
for the  
Final Examination