

# The Graduate School

## Preliminary Approval of Draft of Thesis, Dissertation, or DNP Synthesis Project



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This form must be attached to the defended thesis, dissertation, or DNP synthesis project upon submission to the Graduate School for editing and final approval/clearance for graduation. Editing cannot begin without inclusion of this form with signature/approval of the committee chair/faculty advisor.

### Student Information

Student Name: \_\_\_\_\_

Student CLID: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Graduate Degree Program: \_\_\_\_\_

Title of Style Manual\* or Journal\*\* used: \_\_\_\_\_

\* Include the edition used, if applicable.

\*\* Attach a copy of an article with references and endnotes from the journal used.

Have you defended the manuscript being submitted?  Yes  No

Have you made all revisions mandated by the committee?  Yes  No

Have you signed and submitted the "Acknowledgement of Responsibility for Copyright Compliance"?  Yes  No

(This form should have been signed and submitted with your Application for Candidacy.)

Did you receive approval from the IRB (or other research compliance entity such as IACUC, IBC, or Radiation Safety Committee) for research included here?  Yes  No  N/A

If yes, provide the approval number: \_\_\_\_\_

### To the Committee Chairperson/Faculty Advisor:

Your signature on this "preliminary approval" form signifies that you have read the draft of the defended thesis, dissertation, or DNP synthesis project of the above named student and agree that the student has made all revisions mandated by the committee and that the document meets acceptable standards of writing for your discipline. Your signature also indicates that you have found appropriate parts of the thesis, dissertation, or DNP synthesis project to be prepared according to the requirements of the style manual or journal named above, and that the document otherwise conforms to the requirements of the Graduate School.

Thank you for helping our students prepare outstanding theses and dissertations, and thank you for serving as a member of the graduate faculty at UL Lafayette.

\_\_\_\_\_  
Signature of Committee Chairperson/Faculty Advisor      Date

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

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