



Complete this form and obtain the required signatures after the final project has been reviewed and approved by your committee.
(Your program will send a copy of your project to ScholarWorks@UA along with any waiver forms required if an embargo is requested.)

STUDENT NAME		STUDENT ID
EMAIL		PHONE NUMBER
DEGREE (MS, MBA, MA PhD)	PROGRAM	CONCENTRATION (if applicable)

IRB/IACUC # (if applicable):	Embargo Requested? No ___ Yes ___ (for how long?) ___ 6 months ___ 1 year ___ 2 years
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Project Title: (exactly as it appears on the Title page)

Student Signature: I hereby give my permission to the University of Alaska Anchorage to upload this project to ScholarWorks@UA and to release this project for public review.	Date:
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Approved By:

To the best of my knowledge, I, the undersigned, affirm that all recommended changes have been made to the project and, if applicable, all confidential, and proprietary consent has been properly addressed.

Committee Member Signature	Printed Name and Date
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Committee Member Signature	Printed Name and Date
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Committee Member Signature	Printed Name and Date
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Committee Member Signature	Printed Name and Date
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Outside Examiner Signature (for DNP Projects)	Printed Name and Date
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Co-Chair Signature (please choose if applicable)	Printed Name and Date
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Committee Chair Signature	Printed Name and Date
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Department Chair/Director Signature	Printed Name and Date
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College Dean's (or Designee) Signature	Printed Name and Date
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Graduate School Use Only:

Entered SHAQPNO: ___/___/___	SGASADD Complete ___/___/___	Paperwork Complete? ___Yes ___No	Cleared to Graduate? ___Yes ___No Date / /
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Notes:

