



# Washington University in St. Louis

## THE GRADUATE SCHOOL

### DOCTOR OF LIBERAL ARTS THESIS APPROVAL FORM

Date \_\_\_\_\_

To the Graduate School:

We, the undersigned, report that as a committee we have examined the thesis entitled

\_\_\_\_\_

and have given it our approval for acceptance in partial fulfillment of the requirements for the degree of Doctor of Liberal Arts. Furthermore, we have examined

\_\_\_\_\_ upon the work done in Liberal Arts and find that (his, her)

attainments are such that (he, she) may properly be admitted to the degree of Doctor of Liberal Arts.

Signed \_\_\_\_\_, Chair \_\_\_\_\_

\_\_\_\_\_

I concur with the foregoing report

\_\_\_\_\_  
Chair of Department or Program

I dissent from the foregoing report.

\_\_\_\_\_

*This form should be signed and forwarded to the Graduate School, Cupples II Suite 204 or Campus Box 1187.*

**Recorded by the Graduate School (initial/date):** \_\_\_\_\_

**Thesis Submission Approved (initial/date):** \_\_\_\_\_