

# Elliott School of International Affairs

THE GEORGE WASHINGTON UNIVERSITY

## Graduate Student Thesis - Final Approval Form

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

GWid: \_\_\_\_\_

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

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

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Date: \_\_\_\_\_

Major: \_\_\_\_\_

Thesis Title:

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### Faculty Approval:

*We certify that we have examined the above student's thesis. We recommend this thesis be accepted to satisfy the thesis requirement for the Master of Arts Degree in The Elliott School of International Affairs.*

\_\_\_\_\_  
Thesis Director's Name (Please Print)

\_\_\_\_\_  
Thesis Director's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Second Reader's Name (Please Print)

\_\_\_\_\_  
Second Reader's Signature

\_\_\_\_\_  
Date

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### ESIA Academic Advising Approval:

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date