

**STATE UNIVERSITY OF NEW YORK
COLLEGE OF ENVIRONMENTAL SCIENCE AND FORESTRY
The Graduate School**

TO:

Department Chairperson, Program Director or Area Leader (GPES only)

FROM:

Major Professor

SUBJECT: Completion of Degree Requirements for

☐ Delimitation date extended to end of semester.

As major professor, I certify the above-named student has successfully completed the following requirements and recommend the ☐M.S. ☐M.F. ☐M.L.A. ☐M.P.S. ☐Ph.D. be awarded.

☐ All coursework/academic requirements as established in Form 3B

☐ All communications skills requirements met

☐ Capstone requirement has been fulfilled

☐ Research tools demonstrated

Signature

Date

TO: The Graduate School

FROM:

Department Chairperson, Program Director or Area Leader (GPES only)

As chairperson of the department in which this student is matriculated, I concur that the degree requirements noted above were successfully completed and I recommend the appropriate degree be awarded.

Signature

Date

TO: Registrar

FROM: The Graduate School

I certify all degree requirements for the above-named student were successfully completed on _____ and authorize the ☐M.S. ☐M.F. ☐M.L.A. ☐M.P.S. ☐Ph.D. be awarded.

Signature

Date

cc: Department

CRT _____