## Submission of Doctoral Dissertation for Format Review

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<tr>
<th>Candidate:</th>
<th>FIDN:</th>
<th>REVIEW #:</th>
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<th>Degree:</th>
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<tr>
<th>Academic Unit:</th>
<th>CLAIR C&amp;T ELAP PES</th>
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<th>Fall Spring Summer Year:</th>
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<th>Graduation (expected):</th>
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**Only required for Review #1:**

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**Academic Unit: Please retain a copy and then submit the signed original to the Dean’s Office.**

**Dean’s Office: Please provide a copy to the Assistant Dean of Administrative Services.**

<table>
<thead>
<tr>
<th>DEAN’S OFFICE, RCVD BY:</th>
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