GEORGIA INSTITUTE OF TECHNOLOGY
Office of Graduate Studies & Research

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We, the below signed, hereby state our full approval of the thesis submitted by the above student in partial fulfillment of the requirements for the degree of Doctor of Philosophy in the School/College of School of HTS/Ivan Allen College.

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_____ Thesis Advisor	_____ Print last name & dept.	_____ Member, Reading Committee	_____ Print last name & dept.
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