Certificate of Research Option Approval

Sam Nunn School of International Affairs Ivan Allen College of Liberal Arts Georgia Institute of Technology

This form will not be signed by the undergraduate coordinator until the two faculty readers have given their signature approval.

Date: _____

Student Name				
gtID#				
Major				
Faculty Mentor Name				
Thesis Title				
A. Required Coursework				
Please <i>individually</i> list all completed resoft nine hours of undergraduate research		., 2698, 2699, 469	98, 4699). Mus	t contain a minimun
Course		Credit Hours	Semester/Ye	ear Completed
LMC 4701, Undergraduate Research Proposal Writing		1		•
LMC 4702, Undergraduate Research Thesis Writing		1		
B. Other Requirements				
b. Other Requirements				
None				
C. Completion of Thesis				
We, the below signed, hereby state our j fulfillment of the requirements for the R		e thesis submitted	by the above si	tudent in partial
Faculty Mentor (print name)	Signature			Date
Faculty 2 nd Thesis Reader (print name)	Signature			Date
D. School Approval				
Approval to Grant Research Option Design	nation			
Undergraduate Coordinator (print name)	Signature			Date

E. Thesis Electronic Archiving Permissions

Certificate of Authenticity					
I certify that the content of this electronic	thesis is the same con	tent approved by my committee.			
I Agree					
Copyright Statement					
owner(s) of each third party copyrighted n	, if appropriate, I have obtained and attached hereto a written permission statement from the rd party copyrighted matter to be included in my thesis, dissertation, or project report, n as specified below. I certify that the version I submitted is the same as that approved by my				
conditions specified below, my thesis, disa	sertation, or project re ownership rights to th	cense to archive and make accessible, under the port in whole or in part in all forms of media, e copyright of the thesis, dissertation or project eles or books) all or part of this thesis,			
I Agree					
Availability					
option thesis archive with the following st	atus: (Please select on				
restricted for a period of one year to all, in situations such as when a patent application option MAY ONLY BE EXERCISED YOU MAY CHOOSE THIS OPTION, BUMEMBER ACCESS WILL BECOME WE	ncluding the Georgia Ton is planned, or when WITH THE WRITTE UT IF NO LETTER IS ORLDWIDE. (This open request for an extended)	Tech community. This option addresses proprietary interests are at stake. NOTE: THIS N CONSENT OF THE MAJOR PROFESSOR.			
Printed Name of Student	-	School Granting Research Option			
Student Signature	-	Date			
Mentor Approval					
I certify that this Research Option Thesis of SMARTech (smartech.gatech.edu), and I lor other reasons it should be restricted.	•	cly through Georgia Tech's repository, il, proprietary, U.S. government security-related,			
Printed Name of Mentor	Signature				

Thesis Archiving Submission Instructions

1. Students must hand deliver a *copy* of this form between 8:00am and 4:00pm with all required signatures *no later than the last day of finals* to:

Undergraduate Research Opportunities Program (UROP) Georgia Institute of Technology Clough Undergraduate Learning Commons 266 Fourth Street NW, Suite 205 Atlanta, GA 30332-0940

Alternatively, students may scan and email their completed form to urop@gatech.edu.

The original form will remain with the school.

- 2. Students will create an account on the electronic Research Option thesis website https://thesis.gatech.edu. After all signatures have been obtained, the student will: (a) paste the thesis abstract into the appropriate box (350-word limit) on this website, (b) enter keywords and phrases (separated by commas), and (c) upload their thesis.
- 3. Upon receipt of the copy of the signed certification form in the UROP office and student graduation (confirmed by the Registrar's Office), the thesis will be posted electronically with the library via SMARTech. (Please allow at least two to three weeks for posting following graduation.)