

**Department of Linguistics
University of British Columbia**

COMPLETION OF THESIS FOR MA

This form is for the purpose of recording information concerning THESIS REQUIREMENTS for MA students in the Department of Linguistics. The supervisor of the committee should return the completed the form to the Graduate Advisor, along with a copy of the final version of the MA thesis.

To (name of graduate advisor): _____

From (name of supervisor): _____

Date: _____

Re: completion of MA thesis

This is to certify that the final version of the MA thesis of the following student was approved by her/his committee, and that it has been filed at the University Library.

Student Name	
Thesis title	
Defense date	
Grade awarded	
Date filed at library (receipt attached)	
Supervisor	
Co-supervisor (if any)	
Committee members	