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**APPROVAL FORM FOR EDITING**

**INITIAL SUBMISSION OF THESIS/DISSERTATION**

This form is to be completed by the student and submitted to his/her Committee Chair along with an Initial Submission before or by the stated deadline for Initial Submissions. See <https://www.lamar.edu/graduate-studies/calendar-of-events-and-deadlines.html>

The Committee Chair will, in turn, submit the Approval to Edit form along with the Initial Submission to gradeditor@lamar.edu either signed by all committee members or cc’ing all committee members . The College of Graduate Studies does not provide editorial service. Work which has major grammatical, spelling, style, or other problems will be returned to the student and the Committee Chair with a recommendation for professional editing.

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 Student’s Name (Print) LU ID# Dept.

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 Style Format Used Phone # Email

Date of Defense: \_\_\_\_\_\_\_\_\_\_ Semester of Workshop Attendance: \_\_\_\_\_\_\_\_\_\_\_

From the Committee:

We certify that we have read this preliminary work and approve its submission to the College of Graduate Studies. Although it is subject to changes resulting from the oral defense, we consider its academic merit to meet the standards of the discipline and the University department. Further we certify that we have reviewed the work for conformity to an approved style manual as noted above (e.g., ACS, APA, MLA, or Chicago) and for grammatical and spelling errors. We understand that the Office of Graduate Studies will assist students in matters relating to style conformity but will return this work to the student and the supervising professor where significant problems are found.

Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

 Supervising Professor

Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

 Committee Member

Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

 Committee Member

Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

 Committee Member (if needed)

Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sign: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Committee Member (if needed)

12/22