



# DISSERTATION APPROVAL

## WESTERN MICHIGAN UNIVERSITY GRADUATE COLLEGE

Date: \_\_\_\_\_

WE HEREBY APPROVE THE DISSERTATION SUBMITTED BY:

\_\_\_\_\_

ENTITLED:

\_\_\_\_\_

AS PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE OF:

\_\_\_\_\_

DEPARTMENT

\_\_\_\_\_

\_\_\_\_\_

Dissertation Review Committee Chair

PROGRAM

\_\_\_\_\_

\_\_\_\_\_

Dissertation Review Committee Member

\_\_\_\_\_

Dissertation Review Committee Member

\_\_\_\_\_

Dissertation Review Committee Member

\_\_\_\_\_

Dissertation Review Committee Member

APPROVED

\_\_\_\_\_

Dean of the Graduate College

\_\_\_\_\_

Date Approved