

MS PROJECT APPROVAL FORM
Department of Civil and Environmental Engineering
PORTLAND STATE UNIVERSITY
GRADUATE PROGRAM

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Student Name _____ ID # _____

Project Title _____

Technical Presentation Date _____

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I have read and fully understood the above paragraphs.

Student Signature _____ Date _____

Address _____

Telephone _____ Email _____

Approvals

I certify that the above student has completed the departmental MS Project requirements. (Please note that a grade must also be entered online.)

Adviser Name _____

Adviser Signature _____ Date _____

Graduate Chair Signature _____ Date _____