## EDWARDSVILLE

## **REGISTRATION OF THESIS OR DOCTORAL PROJECT / DISSERTATION TITLE FORM** Southern Illinois University Edwardsville

Graduate Records, Rendleman Hall, Room 1309, Campus Box 1047 Edwardsville, IL 62026 (618) 650-3167 Fax: (618) 650-3332

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Name		Student Identification Number
treet	City	State Zip Code
Graduate Major	Daytime	hone number or e-mail address
<b>Fitle</b> (please print or type)		
Nature of Research (pleas	se print or type; briefly describe, in laymen terms, the i	nformation-gathering methods and sources to be us
Student must contact or visit the website (si materials, human subj	volves the use of: animals hu the Office of Research and Projects in the Gr iue.edu/orp) for the guidelines and protocols jects, or recombinant DNA. Under Universit research in these areas, carried out on- or off	aduate School, Rendleman Hall, Room 22 involved in the use of animals, biohazardo y assurance with the respective federal campus, must comply with government
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## Approved by the Dean of the Graduate School: \_\_\_\_\_