**Certificate of Research Option Approval**

**College of Computing**

*This form will not be signed by the undergraduate coordinator until the student has turned in a copy of the approved thesis to the undergraduate coordinator (Ms. Daurette Joseph).*

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Student Name** |  |
| **GTID#** |  |
| **Major** |  |
| **Faculty Mentor** |  |
| **Thesis Title** |  |

**A. Required Coursework**

|  |  |
| --- | --- |
| **Courses** | **Semester Completed** |
| Thesis Writing Course (LMC 4701 or approved equivalent) |  |
| Thesis Writing Course (LMC 4702 or approved equivalent) |  |
| Research Courses (9 hours minimum, 4699, 4698, or specific course in major – *list individually*) |  |
|  |  |
|  |  |
|  |  |

**B.Other Requirements**

Many schools require the thesis work to be presented in a specific forum or participation in a series of seminars. This would be where schools would insert their own specific requirements.

**C. Completion of Thesis**

*We, the below signed, hereby state our full approval of the thesis submitted by the above student in partial fulfillment of the requirements for the Research Option.*

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**Faculty mentor (print name) Signature Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Faculty 2nd Thesis Reader (print name) Signature Date**

**D. School Approval**

***Approval to Grant Research Option Designation***

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Undergraduate Coordinator (print name) Signature Date**

**E. Thesis Electronic Archiving Permissions**

**Certificate of Authenticity**

I certify that the content of this electronic thesis is the same content approved by my committee.

\_\_\_\_\_ I Agree

**Copyright Statement**

I hereby certify that, if appropriate, I have obtained and attached hereto a written permission statement from the owner(s) of each third party copyrighted matter to be included in my thesis, dissertation, or project report, allowing distribution as specified below. I certify that the version I submitted is the same as that approved by my advisory committee.

I hereby grant to Georgia Tech or its agents the non-exclusive license to archive and make accessible, under the conditions specified below, my thesis, dissertation, or project report in whole or in part in all forms of media, now or hereafter known. I retain all other ownership rights to the copyright of the thesis, dissertation or project report. I also retain the right to use in future works (such as articles or books) all or part of this thesis, dissertation, or project report.

\_\_\_\_\_ I Agree

**Availability**

My advisory committee and I agree that the above mentioned document be placed in the electronic research option thesis archive with the following status: (choose one)

\_\_\_\_\_ 1. Release the entire work immediately for access worldwide after my graduation.

\_\_\_\_\_ 2. Secure the entire work for one year. Access to all portions of the research option thesis will be restricted for a period of one year to all, including the Georgia Tech community. This option addresses situations such as when a patent application is planned, or when proprietary interests are at stake. NOTE: THIS OPTION MAY ONLY BE EXERCISED WITH THE WRITTEN CONSENT OF THE MAJOR PROFESSOR. YOU MAY CHOOSE THIS OPTION, BUT IF NO LETTER IS RECEIVED FROM THE FACULTY MEMBER ACCESS WILL BECOME WORLDWIDE. (This option may be extended if the major professor petitions the library in writing. If no written request for an extension is requested and granted, the thesis will be released after one year without further notice.)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name of Student School Granting Research Option**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student Signature Date**

**Abstract**

If you have an abstract for this Thesis, please paste it into the box on the online site and limit to 350 words.

**Keywords**

Enter keywords and phrases separated by a comma on the online site.

You may also attach a hard copy to this form including the abstract and keywords in addition to submitting on the online site.

**Mentor Approval**

I certify that this Research Option Thesis can be available publicly through Georgia Tech’s repository, SMARTech ([http://SMARTech.gatech.edu](http://smartech.gatech.edu/)) and I know of no contractual, proprietary, U.S. government security-related, or other reasons it should be restricted.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name of Mentor**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature Date**

**Thesis Archiving Submission Instructions**

1. Students should send a ***copy*** of this form showing all required signatures ***no later than the last day of finals*** to:

Undergraduate Research Opportunities Program (UROP)

Georgia Institution of Technology

Clough Undergraduate Leaning Commons

266 Fourth Street NW, Suite 205-F

Atlanta, GA 30332-0940

Or students may scan and email their form to urop.gatech.edu

*The original will remain with the school.*

2. Students will create an account on the electronic research option thesis website at <http://thesis.gatech.edu> and upload their thesis to the electronic research option thesis website after all signatures have been obtained.

3. Upon receipt of the copy of the signed approvals form in the UROP office and student graduation (confirmed by the registrar’s office), the thesis will be posted electronically with the library via SMARTech. (Please allow at least 2-3 weeks for posting following graduation).