To the Office of Graduate Study and Lifelong Learning:

I am submitting herewith a research report, including Abstract, written by [Click and type Name of Student here], [Click and type Student ID # here], entitled "[Click and type Title of Research Report here]". I have examined the final copy of this report for inclusion of the committee’s required revisions, as well as for form and content, and recommend that it be accepted in partial fulfillment of the requirements for the degree of Doctor of Science in Physical Therapy.

_________________________________________ (Signature)

[Click and type Committee Chair’s name here], Ph.D.
Physical Therapy Program
School of Health Sciences

_________________________________________ (Signature)

"[Click and type Program Coordinator's name here]", Ph.D.
Physical Therapy Program
School of Health Sciences