

# Certificate of Research Option Approval

School of Earth and Atmospheric Sciences  
College of Sciences  
Georgia Institute of Technology

*This form will not be signed by the undergraduate coordinator until the two faculty readers have given their signature approval.*

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

<b>Student Name</b>	
<b>gtID#</b>	
<b>Major</b>	
<b>Faculty Mentor Name</b>	
<b>Thesis Title</b>	

## A. Required Coursework

Please *individually* list all completed research courses (e.g., 2698, 2699, 4698, 4699). Must contain a minimum of nine hours of undergraduate research.

Course	Credit Hours	Semester/Year Completed
LMC 4701, Undergraduate Research Proposal Writing	1	
LMC 4702, Undergraduate Research Thesis Writing	1	

## B. Other Requirements

None

## 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.*

\_\_\_\_\_  
Faculty Mentor (print name)                      Signature                      Date

\_\_\_\_\_  
Faculty 2<sup>nd</sup> 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: (Please select 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**

### Mentor Approval

I certify that this Research Option Thesis can be available publicly through Georgia Tech's repository, SMARTech ([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 must hand deliver a *copy* of this form between 8:00am and 4:00pm with all required signatures *no later than the last day of finals* to:

Undergraduate Research Opportunities Program (UROP)  
Georgia Institute of Technology  
Clough Undergraduate Learning Commons  
266 Fourth Street NW, Suite 205  
Atlanta, GA 30332-0940

Alternatively, students may scan and email their completed form to [urop@gatech.edu](mailto:urop@gatech.edu).

*The original form will remain with the school.*

2. Students will create an account on the electronic Research Option thesis website <https://thesis.gatech.edu>. After all signatures have been obtained, the student will: (a) paste the thesis abstract into the appropriate box (350-word limit) on this website, (b) enter keywords and phrases (separated by commas), and (c) upload their thesis.
3. Upon receipt of the copy of the signed certification 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 two to three weeks for posting following graduation.)