

**ACTION RESEARCH/MASTER'S REPORT SUBMISSION FORM**

**ACTION RESEARCH REPORT**
                         
  **MASTER'S REPORT**

**Name of Candidate:** \_\_\_\_\_ **Banner ID:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Bulldog E-mail:** \_\_\_\_\_

**Program Major:** \_\_\_\_\_

**Title of Document:** \_\_\_\_\_

**Graduation Term:**     Fall                     Spring                     Summer                    Year: \_\_\_\_\_

**Document Submission Date:** \_\_\_\_\_ **Submission:**    First     Second     Third or more

**CONTENT APPROVAL BY DEPARTMENT**

**APPROVED**
                         
  **REJECTED**

\_\_\_\_\_  
Advisor Name

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Chairperson Name

\_\_\_\_\_  
Signature Date

*Note: Signatures above certify that the student gained Mastery in subject matter in the capstone document.*

**Documents and Submission Form must be scanned and sent to [aamu\\_reviewer@aamu.edu](mailto:aamu_reviewer@aamu.edu) by Department.**

**FORMAT APPROVAL BY REVIEWER**

**APPROVED**
                         
  **REJECTED**

Date of Approval: \_\_\_\_\_

\_\_\_\_\_  
AAMU Reviewer Name

\_\_\_\_\_  
Signature Date

**Final Form must be submitted by AAMU Reviewer to [thesisdissertation@aamu.edu](mailto:thesisdissertation@aamu.edu)**