

Electronic Thesis and Dissertation (ETD) Access Form

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The PSU Library needs your FULL name for cataloging purposes.

Degree _____ Major _____

Date of Birth _____ Term of Graduation _____

PSU may need to contact you months from now regarding your ETD submission. Please think carefully about long-term contact information.

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Select only one of the following three options: A, B, or C.

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OR

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Return completed and signed form to the Office of Graduate Studies

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