



Penn Arts & Sciences

College of Liberal and Professional Studies • Master of Liberal Arts Program

This is to certify that

Student's Name

Student Social Security Number: XXX - XX - _____

has completed a Capstone project entitled:

Comments:

Signatures of Capstone Project Committee Members:

Primary Reader

Date

Secondary Reader

Date

Note: This form will be placed in the student's file and is available to the student for review upon request