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**THESIS TITLE**

**By**

**YOUR NAME**

A Thesis Submitted in partial fulfillment of the requirements for the degree of Master of Science in Science, Technology, and Public Policy

**Department of Public Policy**

**College of Liberal Arts**

**Rochester Institute of Technology**

**Rochester, NY**

**DATE**

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*Masters of Science, Science, Technology and Public Policy*

*Thesis Submitted in Partial Fulfillment of the Graduation Requirements for the*

*College of Liberal Arts/Public Policy Program at*

*ROCHESTER INSTITUTE OF TECHNOLOGY*

*Rochester, New York*

*MONTH, YEAR*

*Submitted by*:

Student Name

Signature Date

*Accepted by:*

Committee Member Name/Title

Department/Rochester Institute of Technology Signature Date

Committee Member Name/Title

Department/Rochester Institute of Technology Signature Date

Committee Member Name/Title

Department/Rochester Institute of Technology Signature Date

Dr. Franz Foltz/Graduate Director

Department /Rochester Institute of Technology Signature Date