

Capstone Report Approval
The Graduate School
Southern Illinois University

	Date of Approval
I hereby recommend that the dissertation pro	epared under my supervision by
Student Name	ID Number
Entitled	
be accepted in partial fulfillment of the requ	irements for the
DOCTOR OF EI	DUCATION degree
	Committee Chair
	Dean of School of Education
Committee for the Final Examination	
Recommendation concurred in	
Name (Type/Print)	Signature