VirginiaTech Graduate School

THESIS AND DISSERTATION APPROVAL FORM

Students submitting a thesis or dissertation must do so electronically. Complete instructions are located on the Electronic Thesis and Dissertation (ETD) website, *http://etd.vt.edu*. This form is required to initiate the review and approval by the Graduate School. This is the final step leading to review of your record for degree conferral.

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PERSONAL INFO

LAST/FAMILY NAME	FIRST/GIVEN NAME	MIDDLE NAME	SUFFIX
Kelley	Marilin	Annie	

Student ID Number:

Date of Birth: 01/14/1997 (month/day/year)

E-mail Address: mk4k@vt.edu (*@vt.edu* account, preferred)

Daytime Phone: (615)308-6304 ☐ Home ☐ Office ☐ Mobile

Local Address

n/a

Blacksburg, VA 24060 USA

city state zip country

Citizenship

☑ U.S. CITIZEN ☐ PERMANENT RESIDENT ☐ NON-RESIDENT ALIEN*

**If non-resident alien, please list your visa status:*

Current Program

Masters of Science in Mathematics

Degree Level

☐ DOCTORAL

☑ MASTERS

First Term of Enrollment

☑ FALL ☐ SPRING ☐ SUMMER I ☐ SUMMER II 2019 year

Anticipated Completion Term

☑ FALL ☐ SPRING ☐ SUMMER I ☐ SUMMER II 2020 year

Campus

☑ BLACKSBURG ☐ HAMPTON ROADS ☐ NATIONAL CAPITAL REGION ☐ RICHMOND ☐ ROANOKE ☐ SOUTHWEST VIRGINIA

Date of Defense: Dec. 11, 2020

Date of ETD Submission: Dec 15, 2020

Document Title:

Teachers Reflection on Inquiry-Oriented Instruction in Online Professional Development

SIGNATURES

Review and Acceptance - Required (Original) Signatures

The final thesis/dissertation has been reviewed and accepted by the Committee Chairperson and the Advisory Committee.

ACTION CODE **Committee Members, please indicate your approval of this student's thesis/dissertation by placing one of the following codes before your signature: A: Approved, D: Disapproved.**

ACTION CODE	signature	printed name	e-mail (*@vt.edu*, preferred)	date
A	COMMITTEE MEMBER signature	Megan Wawro	mwawro@vt.edu	12/14/2020
A	COMMITTEE MEMBER signature	Anderson Norton	norton3@vt.edu	12/14/2020
	COMMITTEE MEMBER signature	printed name	e-mail (*@vt.edu*, preferred)	date
	COMMITTEE MEMBER signature	printed name	e-mail (*@vt.edu*, preferred)	date
	COMMITTEE MEMBER signature	printed name	e-mail (*@vt.edu*, preferred)	date
A	COMMITTEE CHAIRPERSON signature	Estrella Johnson	strej@vt.edu	12/14/20
	COMMITTEE CO-CHAIRPERSON signature	printed name	e-mail (*@vt.edu*, preferred)	date
	DEPARTMENT HEAD signature or authorized GRADUATE PROGRAM DIRECTOR	printed name	e-mail (*@vt.edu*, preferred)	date

Questions? Call 540/231-8636 or e-mail *gradappl@vt.edu* for assistance.

ACCESS

PROXY

STUDENT AGREEMENT

Student and Committee Agreement

PART A.
My advisory committee and I agree that the above-mentioned document be placed in the ETD archive with the following status: (choose one)

☑ **Option 1.** Provide access to the ETD.

☐ **Option 2.** Restrict access to the ETD for Virginia Tech only for a period of 1 year.

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Student Agreement

I hereby certify that, if appropriate, I have obtained and attached hereto a written permission statement from the owner(s) of each third party copyrighted matter to be included in my thesis or dissertation, allowing distribution as specified above. I certify that the version I submitted is the same as that approved by my advisory committee. INITIALS MK

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Marilin Kelley — 12/13/20
STUDENT SIGNATURE — date

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Blacksburg, VA 24061
Fax: 540/231-2039

DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) signature — date

GRADUATE SCHOOL signature — date

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