



Student Name Aaron Allred Student ID *****

Master's _____ Degree in Aerospace Engineering Sciences

Thesis Title:

Vestibular Perceptual Thresholds for Angular Rotation about the Yaw, Roll, and Pitch Axes

Have you performed research involving human subjects which requires approval from the Institutional Review Board (IRB)? Yes No

IRB Protocol Number 17-0663

Have you used live animals, animal tissue, or observational animal work which requires approval from the Institutional Animal Care and Use Committee (IACUC)? Yes No

IACUC Protocol Number _____

Attach the final copy of thesis/dissertation for committee review. While formatting changes may be requested by the Graduate School, the content of the attached document should be final.



Approvals:

Committee Chair Name Torin Clark

Signature  _____ Date Signed 11/29/2021

Committee Member Name David Klaus

Signature  _____ Date Signed 11/30/2021

The final copy of this thesis has been examined by the signatories, and we find that both the content and the form meet acceptable presentation standards of scholarly work in the above-mentioned discipline.