

Office of Graduate Studies
Knoles Hall 204

REPORT OF DEPARTMENTAL EXAMINATION FOR
MASTER'S DEGREE

IMPORTANT: This report is to filed at the Graduate School office no later than the deadline date for Masters written/oral exams in the semester in which the candidate expects to receive her/his degree. Consult the Graduate School Calendar for these dates.

All members of the candidate's examining committee should sign this report and should feel free to make any comments they wish in the space below the signatures.

Student ID 988# _____

This certifies that _____

satisfactorily passed a masters degree examination given on the following

Date _____.

(Signed) Department Chairperson _____

Other Members: _____
