THE GRADUATE SCHOOL
UNIVERSITY OF COLORADO at BOULDER

MASTER'S EXAMINATION OR
PROJECT REPORT

Student's Name _____ Student Number # _____
Last, First, MI

Date of Examination _____

(Check One) ___Thesis defense ___Comprehensive/Final Exam ___Project Defense ___Capstone

Degree/Major _____
(M.A., M.E., M.S. BACH/MAS.)

Campus, check one: _____BOULDER _____CATECS

Committee Members		Signatures	
Name	Dept Chair	Satisfactory	Unsatisfactory

Departmental Approval of Committee _____ Date_____
(If Appropriate)

Graduate School Approval of Committee _____ Date_____

Overall Examination was: Satisfactory or Unsatisfactory
(Circle one)

Final Exam:

Master's comprehensive/final exam, thesis or project defense **must be scheduled with the Graduate School at least two weeks before the exam is held, by submitting this form.** The final examining committee is comprised of a minimum of three faculty members All members of the committee must hold a graduate faculty appointment. The Chair must have a regular appointment; the other committee members must be either regular or special members. Student must be registered "for credit" for a minimum of 1 hour on the Boulder campus, during the semester of the final exam/thesis or project defense.

Revised 8/04