

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.)

Committee Members

Signatures

Name	Dept.	Chair	Satisfactory	Unsatisfactory

Departmental Approval of Committee _____
(If Appropriate)

Date_____

Graduate School Approval of Committee _____

Date_____

[illegible]

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.