

**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 Creative Thesis Project

Degree/Major _____

Committee Members		Signatures	
Name	Dept.	Satisfactory	Unsatisfactory
Chair			

Departmental Approval of Committee _____ Date _____
(If Appropriate)

Graduate School Approval of Committee _____ Date _____

Overall Examination was: Satisfactory or Unsatisfactory
(Check one)

Final Exam:

The committee for the comprehensive/final exam, thesis or project defense **must be approved by 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.