

NACS Non-Thesis Master's Degree Completion Form

Student: _____ UID _____

Date Written Report was submitted: _____ Date of Oral Presentation: _____

Result:

Student has met the requirements for the written report and the oral presentation without any recommended changes. Chair and committee members sign below.

Student has met the requirements for the written report and the oral presentation with recommended changes on the written report. Committee members sign below. The Chair will check the modified written report and, upon his/her approval, sign below.

Student needs to rewrite the written report. Chair and committee members will check the rewritten report and, upon their approval, sign below. Chair: on the lines below, please indicate the specific problems the student must correct and the timeframe for completing them.

Student needs to repeat the oral presentation. Chair and committee members sign below. A new Completion Form will be used for the repeat oral presentation. Chair: on the lines below, please indicate the specific problems the student must correct and the timeframe for completing them.

	Printed name	Signature	Date
Chair:	_____	_____	_____
Member:	_____	_____	_____
Member:	_____	_____	_____
Member:	_____	_____	_____

Approved by the Graduate Director: _____
Signature Date