



MASTER'S ORAL EXAMINATION REPORT

NAME OF CANDIDATE: _____

CONCENTRATION: _____ PLAN FOLLOWED: RECITAL THESIS

RECITAL DATE: _____

EXAM DATE: _____ TIME: _____ LOCATION: _____

EXAMINING COMMITTEE: _____

COMMITTEE REPORT ON MASTER'S ORAL EXAMINATION

PREPARATION:

ABILITY TO COORDINATE AND INTERPRET, CRITICAL THINKING:

SYNTHESIS OF THEORETICAL AND HISTORICAL KNOWLEDGE WITHIN THE CONCENTRATION:

ORIGINAL RESEARCH WITH APPROPRIATE FORMAT FOR CONCENTRATION APPROVED: (M.A. STUDENTS ONLY)

PENDING REVISION

NO REVISION REQUIRED

It is hereby certified, on the basis of the candidate's command of knowledge in their major, minor, and cognate fields, if any, and the substantial and acceptable character of the thesis or recital, that this candidate:

SATISFACTORILY PASSED THE MASTER'S ORAL EXAMINATION

DID NOT SATISFACTORILY PASS THE MASTER'S ORAL EXAMINATION

EXAMINING COMMITTEE MEMBERS' SIGNATURES: _____, ADVISOR _____
