



FINAL REPORT – Certifying Fulfillment of Master’s Degree Requirements

PART 1: Please attach an abstract to this form

Name of Candidate _____ ID# _____

Degree to be conferred: Master of Science

Major: _____

Advisor: _____

Thesis Title: _____

	<u>Cr Hr.</u>	<u>Totals:</u>
Totals – DEGREE Major _____	=	_____
NON-DEGREE (over “5000”): List courses _____		_____
SUM OF ALL GRADUATE HOURS PRESENTED		_____

Exam Date _____ Time _____ Advisors: _____

Place _____

The major department is responsible for notifying student and committee of the examination arrangements. Deviations from those stated here should be reported to the Engineering Graduate Office prior to the examination.

RECOMMENDED BY: Signature _____ Date _____
Graduate Program Committee, Chair

Part 2: THESIS COMMITTEE’S REPORT

This is certified that on the basis of the unity, continuity and quality of the student’s courses and his command of knowledge in his major, including the substantial and acceptable character of the thesis or essay if required, that this candidate is:

Satisfactory completion of Master Thesis Defense based on final oral exam.

Unsatisfactory completion of Master Thesis Defense; see remarks below.

Date of Review _____

COMMITTEE MEMBERS’ SIGNATURES:

Remarks:

**Completed form should be submitted to
CSGradAdvisor@wayne.edu.*