

**CENTER FOR GRADUATE STUDIES**

**REPORT OF THE MASTERS DEGREE ADVISORY COMMITTEE**

**Student's Name:** \_\_\_\_\_

**B.S. Degree (Major)** \_\_\_\_\_

**I. Course Program** (course #, credits and semester; place an asterisk\* by your 6 credits of outside coursework)

**Courses taken to satisfy deficiencies in undergraduate preparation** (these classes **do not** count towards the graduate degree):

Dept. (e.g. CSE)	Course # (e.g. 353)	Course title	Credits	Semester (taken/planned)	Leave blank

**Courses counting to NMT masters degree** (do not include classes that do not count towards this degree or those that you wish to reserve for a subsequent graduate degree):

Dept. (e.g. CSE)	Course # (e.g. 353)	Course title	Credits	Semester (taken/planned)	*	Leave blank

List Catalog year to be used for completion of degree requirements: \_\_\_\_\_

Degree program: \_\_\_\_\_ Specialization (if applicable): \_\_\_\_\_

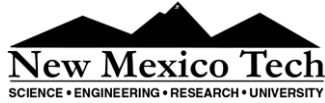
Graduate minor (if applicable) \_\_\_\_\_ (Attach minor form)

Academic Advisor's Acceptance \_\_\_\_\_ Date: \_\_\_\_\_

Committee Members (initial) \_\_\_\_\_

Graduate Dean \_\_\_\_\_ Date: \_\_\_\_\_

**Return to Center for Graduate Studies After Each Entry**



**II. Thesis  or Independent Study**

Title: \_\_\_\_\_

\_\_\_\_\_

Defense/Independent Study Report Pass  Fail

Written report of the defense (copy to student, chair and dean) Date: \_\_\_\_\_

Research Advisor's Acceptance \_\_\_\_\_ Date: \_\_\_\_\_

Committee Members (initial) \_\_\_\_\_

**III. All Requirements Completed:**

Department Chairperson \_\_\_\_\_ Date: \_\_\_\_\_

**IV. Digital copies**

**a) With Thesis**

**Digital Thesis/Dissertation: Submitted:** yes  no  Initials: \_\_\_\_\_

**Accepted:** yes  no  Initials: \_\_\_\_\_

**b) With Independent Study**

**Digital Abstract: Submitted:** yes  no  Initials: \_\_\_\_\_

**Accepted:** yes  no  Initials: \_\_\_\_\_

**V. Written Report of the Advisory Committee:**

Received by \_\_\_\_\_ Date: \_\_\_\_\_