Student Name: ___________________________ PID: A ___ ___ ___ ___ ___ ___ ___

Title of Project: ___________________________. Date of Defense: ___________________________
(You must be enrolled for at least 1 credit)

Results

_____ The Project is satisfactory. The grade is __________.
(Numerical Grade)

_____ The Project is not satisfactory, student needs to do the following:

________________________________________

________________________________________

________________________________________

_____ The Project has been revised as instructed and is now satisfactory.

Date: ___________ Grade: ___________  __________________________
(Committee Chair Signature)

_____ Project is rejected. We recommend: ________________________________

________________________________________

Committee Members:

Primary Project Advisor Signature  Primary Project Advisor Printed Name

Second Advisor Signature  Second Advisor Printed Name

Director of M.A. Studies Signature