



(Complete this form, sign it and submit to your graduate advisor)

Graduate Major: \_\_\_\_\_ Specialization/Track: \_\_\_\_\_

Course Prefix	No.	Course Title	Instructor	Semester Hours	Grade
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[illegible]

Comprehensive Exam Required: Yes ☐ No ☐

**TIME LIMIT FOR COMPLETION:** Eight years from date of enrollment in first class  
**MINIMUM GRADE REQUIREMENT:** No degree credit shall be granted for a grade below C.  
 See catalog for additional, program-specific grade requirements.

College Dean Approval \_\_\_\_\_ Date \_\_\_\_\_

For Graduation Office	Processed by	Date
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