

## **Master's Oral Examination Application**

After securing the agreement of three examination board members and one alternate, please complete this form and submit it to your assigned advisor for their signature. Once signed, the form should be submitted to the Director of Graduate Studies for approval and shared with the Assistant to the Chair for scheduling.

### **Student Information**

Name

Expected Graduation Term

Area of Specialization

Advisor

### **Proposed Examination Date and Time (schedule 60 minutes)**

### **Proposed Examination Board**

Committee Chair

Committee Member 2

Committee Member 3

Alternate

Signature of Advisor

Signature of DGS