

GUIDELINES FOR PROCESSING PERMITS TO SCHEDULE MASTER ORAL EXAMS

Student's Name: _____ Student ID Number: _____

Department: _____

Degree objective: _____

___ Student is currently registered.

___ Any outstanding transcript problems have been corrected.

___ Patent Agreement has been signed and original forwarded to Graduate School.

___ Committee has been approved by department. (External Committee members and Technical Consultants have been pre-approved by the Graduate School.)

___ Plan of Work has been approved by department.

___ Language requirement has been satisfied and proficiency memorandum (when applicable) is on file in Graduate School.

___ Graduate work time limit has not expired. (Request for time extension has been approved by the Graduate School.)

___ GPA is 3.000 or higher on Plan of Work & computer transcript.

___ Request for PBS credit and/or transfer credit has been approved by the Graduate School.

___ All required course work listed on Plan of Work has been completed or is in current registration.

___ Students with an approved co-major or co-minor has completed requirements from both departments.

Department Notes: _____

APPROVED TO REQUEST SCHEDULING OF EXAM BY _____ Date: _____