Final Examination Report

For the Master's Degree | Office of Graduate Studies | University of Nebraska-Lincoln

INSTRUCTIONS

Before submission to Graduate Studies, complete Parts 1 through 5, including signatures in Part 3 but omitting signatures in Part 4. *All information must be typed.*
Due in Graduate Studies at least four weeks before the final oral examination, if required, but not later than the deadline for filing final report for degree.

PART 1: STUDENT AND PROGRAM

First Name _____

Last Name _____

NUID Number _____

Campus Email _____ @huskers.unl.edu

Degree ☒ MA ☐ MAE ☐ MAS ☐ MAT ☐ MBA
☐ MCRP ☐ MEd ☐ MEM ☐ MFA ☐ MLS
☐ MM ☐ MPA ☐ MS ☐ MST

Major Journalism & Mass Communications _____

Specialization _____

Minor _____

Option ☐ A ☒ B

Expected Graduation ☐ May ☐ August ☐ December   Year _____

PART 2: WRITTEN COMPREHENSIVE EXAMINATION

When required, the written comprehensive examination must be taken within 24 months of completion of degree requirements.

MAJOR: Written exam: ☒ Scheduled for (date) _____ and passed (date) _____ ☐ Waived, therefore oral must be taken.

MINOR: Written exam: ☐ Scheduled for (date) _____ and passed (date) _____ ☐ Waived. Minor oral exam waived? ☐ No ☐ Yes
The comprehensive exam (written and/or oral) in the minor department may be waived if all grades in the minor are at least a B or Pass.

PART 3: EXAMINATION PROCEDURE APPROVED

_____
Signature, Major Advisor   Date

_____
Signature, Chair of Graduate Committee, Major Dept.   Date

_____
Signature, Minor Advisor   Date

_____
Signature, Dean for Graduate Studies   Date

PART 4: FINAL ORAL EXAMINATION

SCHEDULED (at least four weeks after filing this form): Date: _____ Time: _____ Building/Room: _____

WAIVED? ☐ No ☐ Yes, final copy of thesis approved by: _____
Signature, Graduate Faculty in Major Dept. other than Advisor   Date

EXAMINING COMMITTEE. All members MUST be Graduate Faculty.

List proposed members. Three members are required.   *After final oral examination, obtain signatures.*

Role	Typed Name	Pass / No Pass	Signature	Date
Chair	_____	☐ ☐	_____	____
Member 2	_____	☐ ☐	_____	____
Member 3	_____	☐ ☐	_____	____
Member 4	_____	☐ ☐	_____	____
Member 5	_____	☐ ☐	_____	____

PART 5: THESIS

Title of thesis: _____

_____

Approved by major advisor: _____
Signature   Date

PART 6: RECOMMENDED FOR DEGREE

_____
Signature, Dean for Graduate Studies   Date

Revised 2021/09 by OGS/EP