

UNIVERSITY OF ARKANSAS

HESC-MS COMPLETION FORM

Student Name Student ID Student UARK Email Date

Master's thesis track Master's non-thesis track

AREA CONCENTRATION: AMPD HDFS HOSP NUTR

THESIS TRACK:

Table with 2 columns: Thesis Title, Defense Date

NON-THESIS TRACK:

Table with 2 columns: Exam, Exam Date

Thesis and/or advisory committees should complete the following as it pertains to either the student's thesis defense (thesis track only) or comprehensive exam completion (non-thesis track only).

COMMITTEE ASSESSMENT: WRITTEN ORAL

Committee CHAIR Name Signature Date Pass Fail Pass Fail

Committee Member Name Signature Date Pass Fail Pass Fail

Committee Member Name Signature Date Pass Fail Pass Fail

Committee Comments: If either portion of the assessment (written/oral) is not successfully passed, the committee should provide specific revisions and timeline necessary for student to successfully complete their degree.

Large empty box for committee comments.

DEPARTMENTAL USE ONLY (to be completed by the Graduate Coordinator)

DEGREE REQUIREMENTS:

- Have been met
Will be met (check all that apply):
When current coursework is satisfactorily completed
With submission of approved thesis to the Mullins Library
With approved transfer of graduate credit
Other:

Graduate Coordinator or School Director Name Signature Date