GRADUATE SCHOOL-NEW BRUNSWICK

Application for the Degree of:

Master of Arts Master of Arts for Teachers Master of Science Master of Science for Teachers Master of Engineering Master of Business and Science Master of Landscape Architecture				
PART I.				
Name		First		
RUID	Graduate Program	T ti St		
Local Address				
Permanent Address				
Phone (day)	(evening)			
Email	Fax			
Previous degrees received: Institution		Degre	ee Ye	ar
List courses below: Course number, Title		Term/Year	Credits	Grade

PART II.

To the student: If you have written a thesis, give its title in Section A; if not, give the title of the essay that satisfied the <u>writing</u> requirement in Section B and obtain the signature of the faculty member who evaluated it. The committee that administered the comprehensive examination should sign in Section C (or D) and the graduate director in Section E.

<u>Please note</u>: Students in programs that have an approved alternative to the comprehensive examination must still solicit signatures in Section C (or D) from the faculty members who have approved their papers or projects. They should not, however, complete Sections A or B.

Section A. Thesis (Thesis Title)	
The candidate's thesis is accepted in partial fulfillment Signature	t of the requirement for the master's degree. Print or type name
(Committee Chairperson) Date	
Section B. Writing Requirement (Non-thesis degree programs Students in non-thesis graduate programs must write a	
(Essay Title)	
The candidate has written a satisfactory essay.	
	Date
(Faculty Evaluator)	
Section C. Comprehensive Examination or alternative We certify that the candidate passed the comprehensive	
Signature	Print or type name
(Committee Chairperson) Date	
Section D. Comprehensive Examination or alternative We certify that the candidate did NOT pass the comprehensive Examination or alternative	
(Committee Chairperson) Date	
Section E. Graduate Program Director Certification I certify that the candidate has satisfied all program require	ments for the master's degree.
	Date
(Graduate Program Director)	
CERTIFICATION OF THE DEAN	
I report to the graduate faculty that the candidate had indicated and advise that he/she be recommended to	s completed all the requirements for the master's degree the Board of Governors for this degree.
DEAN	Date