

Substitute Courses/Transfer Credits: Those substitute/transfer courses marked with an * on the reverse side **must** be listed here. Include the name of the institution. (Official transcripts showing completion of credit to be transferred from other institutions must be on file in the Graduate School PRIOR to approval of the Plan of Study.) The Supervisory Committee recommends the following substitute/transfer credits to satisfy degree requirements.

Approved by:

_____	_____	_____	_____
Advisor	Date	Department/Program Chair	Date
_____	_____	_____	_____
Academic Dean	Date	Graduate Dean	Date

Comprehensive Exam

<u>Date Taken</u>	<u>Pass / No Pass</u>	<u>Date of Retake</u>	<u>Pass/No Pass</u>
_____	_____	_____	_____

To the Registrar:

The candidate has completed all Graduate School requirements for the above-designated degree.

_____	_____
Graduate Dean	Date

Office of the Registrar certifies that this student has satisfactorily completed all course requirements on the Plan of Study filed in the Graduate School.

_____	_____
Office of the Registrar	Date