



THE CATHOLIC UNIVERSITY OF AMERICA
Master's Degree Audit Form

I, _____, respectfully request authorization to present a course of studies in preparation for the M.A. M.S. M.F.A. degree in the School of _____

I received the degree _____ from _____ in _____ (year).

Date: _____

Applicant's Signature

The degree _____ received by applicant has qualified him/her for graduate work.

Dean of School

The applicant has given evidence of satisfying the foreign language requirement.

Language: _____

Means: _____ Date: _____

The applicant has satisfactorily completed _____ credits in his/her major field of study and is recommended for admission to candidacy.

Chair of Department (if applicable)

Dean of School

Master's Degree (non-thesis option)

The required research seminars have been satisfactorily completed.

Course	Grade
_____	_____
_____	_____

Chair of Department (if applicable)

Dean of School

Master's Degree (thesis option):

The title of the thesis is: _____

The thesis committee is: _____

The thesis has been accepted as satisfactory:

Date: _____

Dean of School

FINAL WRITTEN EXAMINATION:

The applicant has satisfactorily completed a written comprehensive examination in his/her major field of study. The questions and papers were filed in the Department/Program Office.

Chair of Department (if applicable)

Date: _____

Dean of School

GRANTING OF DEGREE

The candidate was recommended by the faculty to the Academic Senate for the appropriate degree.

Date: _____

Dean of School

The degree _____ was conferred on the candidate.

Date: _____

Dean of School