



Schedule for Final Defense of Master's Degree (M Exam)
INSTRUCTIONS

- Use this form to schedule an MS, MA, MFA (English or Music), Exam (final defense for the Master's Degree).
 - Email the completed form as a PDF to gradstudserv@cornell.edu. Or deliver to 143 Caldwell Hall.
- The form must be received at least seven calendar days prior to your exam.**
- For detailed policy information, refer to the Code of Legislation, available at www.gradschool.cornell.edu/policies. For additional questions, call Graduate School Student Services at 607-255-5820.

BIOGRAPHICAL INFORMATION

CU 7-digit ID # Net ID Field of Study Degree Program

Last name First name Middle Initial

Date Exam Scheduled: _____ Time: _____ Building & Rm # _____

COMMITTEE SIGNATURES OF APPROVAL FOR PROPOSED SCHEDULE OF EXAM

All members of the committee and the DGS/GFA must sign below. Another member of the Graduate Faculty can, if necessary, sign for a committee member if the committee member has agreed to the scheduling. For committee members participating remotely please check the box and indicate the committee member signing on your behalf in the space provided.

_____	_____	_____	Remote
Chairperson printed name	Chairperson signature	Date	

Printed name of committee member signing Exam Results for Chairperson participating remotely

_____	_____	_____	Remote
Minor committee member printed name	Minor committee member signature	Date	

Printed name of committee member signing Exam Results for minor member participating remotely

_____	_____	_____	Remote
Minor committee member printed name	Minor committee member signature	Date	

Printed name of committee member signing Exam Results for minor member participating remotely

_____	_____	_____	Remote
Additional committee member printed name	Additional committee member signature	Date	

Printed name of committee member signing Exam Results for additional member participating remotely

_____	_____	_____	
Ad hoc committee member (if applicable) printed name	Ad hoc member signature	Date	

_____	_____	_____	
Field appointed for exams printed name	Field appointed for exams signature	Date	

_____	_____	_____	
Director of graduate studies (DGS) signature and date	Graduate field assistant (GFA) signature	Date	