

## **Recommended Arrangements for Final Examination**

Please return this form to the College of Music Graduate Studies Administrative Assistant two weeks prior to your comprehensive exam date. Please use this fillable .pdf as handwritten forms will not be accepted. <u>The email from the Graduate School approving your Admission to</u> <u>Candidacy form must be submitted with this document.</u>

| Name               | Term Graduating                 |
|--------------------|---------------------------------|
| Student ID Number  | Email address                   |
| Phone Number       | Comprehensive Written Exam Date |
| Oral Exam Date     |                                 |
| Chairperson*       | _                               |
| Committee Member*  | _                               |
| Committee Member*  | -                               |
| Committee Member*  | _                               |
| Thesis Program Yes | No                              |
|                    |                                 |

Thesis Title

\*Signatures are not required, but students are advised to remind all committee members, in writing, of exam dates.