



# Dual Degree Report of the Master's Examining Committee

(Submit to the Graduate School as soon as possible after the exam, project presentation or thesis defense)

Candidate's name: \_\_\_\_\_

Mizzou ID number: \_\_\_\_\_ Legacy student number: \_\_\_\_\_

Thesis title (if applicable): \_\_\_\_\_

Date of examination: \_\_\_\_\_

The above-named candidate has been examined by the committee with the following results:

Passed

Failed

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## Signatures of master's committee members

*Please sign full names legibly*

Pass

Fail

Chair: \_\_\_\_\_

\_\_\_\_\_

Outside member: \_\_\_\_\_

Additional members (optional): \_\_\_\_\_

Additional members (optional): \_\_\_\_\_

*Committee action approved:*

\_\_\_\_\_  
First director of graduate studies

\_\_\_\_\_  
Date

\_\_\_\_\_  
Second director of graduate studies

\_\_\_\_\_  
Date

*The results of the final examination are recorded:*

\_\_\_\_\_  
Graduate dean's signature

\_\_\_\_\_  
Date