



DEPARTMENT OF EARTH AND OCEAN SCIENCES

**MEMORANDUM**

TO: Graduate School

VIA: Dr. David Barbeau, Graduate Studies Director, Department of Earth and Ocean Sciences

FROM M.S. Thesis Examination Committee

This is to certify that \_\_\_\_\_,  
\_\_\_\_\_, passed / failed / other (see note) his/her M.S. Research Plan/ Comprehensive Exam  
on \_\_\_\_\_, 20\_\_.

Note (if applicable):

---

---

---

Members of the Examining Committee:

_____ Major Professor/Research Director	_____ Signature
_____ Committee Member	_____ Signature
_____ Committee Member	_____ Signature
_____ Committee Member (If necessary/desired)	_____ Signature

Note: After committee members sign above, return this form to the Student Services Office, Room 108, PSC.

M.S. Research Plan/ Comprehensive Exam