



Office of Graduate & Professional Studies

**NON-THESIS MASTER'S DEGREE**

**REPORT ON FINAL ORAL EXAMINATION\*  
NOT TO BE USED FOR THESIS OR DISSERTATION  
DEFENSES**

<b>NAME:</b>	<b>NAU ID:</b>
<b>NAU EMAIL:</b>	<b>PRIMARY PHONE:</b>
<b>DEGREE/PROGRAM:</b>	
<b>ADVISOR/FACULTY MENTOR:</b>	

VOTE OF COMMITTEE:  
(Two out of three votes are required to pass)

PASSED          VOTES

FAILED          VOTES

COMMENTS:

MEMBERS OF COMMITTEE  
(PRINTED NAME

(SIGNATURE)

, Chair

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DATE:

\*Original form must be submitted and/or scanned  
to: Graduate College  
[gradgraduation@nau.edu](mailto:gradgraduation@nau.edu)