

SEATRiP:
M.A. PROGRAM IN SOUTHEAST ASIAN STUDIES
DESIGNATION OF COMMITTEE
AND EVALUATION OF
THESIS/COMPREHENSIVE EXAM

Student Name: _____ SID #: _____

Part 1: Designation of M.A. Committee (minimum of three members required)

Proposed Committee:

Signatures of Committee:

_____ (Chair)

Approved by Graduate Advisor: _____ Date: _____

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Part 2: Evaluation of Plan 1 (Thesis Exam) or Plan 2 (Comprehensive Exam)

Date of Exam: _____

Pass/No Pass

Signatures of Committee:

Revisions required? (Y/N):

_____ (Chair)

If applicable, date revisions approved by Committee: _____

Approved by Graduate Advisor: _____ Date: _____