

PART I: Student Information

Name of Student (Last name, First name, Middle initial)	10 Digit ASU AFFILIATE ID#
MASTER OF Science in Engineering (MSE)	SPECIALTY AREA

PART II: Culminating Experience Date(s) and Result (must match approved Plan of Study)

EXAM I <input type="checkbox"/> ORAL <input type="checkbox"/> WRITTEN	DATE
<input type="checkbox"/> APPLIED PROJECT/ PORTFOLIO	COMPLETION DATE

PART III: Results

PLEASE LIST NAMES OF COMMITTEE	SIGNATURES	PASSED (X)	FAILED (X)
CHAIR OR CO-CHAIR		<input type="checkbox"/>	<input type="checkbox"/>
CO-CHAIR		<input type="checkbox"/>	<input type="checkbox"/>
MEMBER		<input type="checkbox"/>	<input type="checkbox"/>
MEMBER		<input type="checkbox"/>	<input type="checkbox"/>

PART IV: Final Result

PASSED <input type="checkbox"/>	FAILED <input type="checkbox"/>	SIGNATURE COMMITTEE CHAIR	DATE
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All culminating experience results, including failures, must be reported to the Graduate College. Failure of the culminating experience is final unless the student petitions for a re-examination, the supervisory committee, and the head of the academic unit recommend, and the Graduate College Dean approves the re-examination.