UNIVERSITY OF ARKANSAS | College of Engineering
Mechanical Engineering

GRADUATE PROGRAM RECORD OF PROGRESS

Student Name: _____ Student ID: _____

Program: MSME   Ph.D.

MSME:

The above student passed their Comprehensive Examination on: _____

Date of Examination

COMMITTEE

Member Name (List Chair First)	Signature	Score or Pass/Fail

Non-Thesis Option: Date of Final Examination or Project Approval: _____
Thesis Option: Date of Defense & Grade (Optional): _____

Ph.D.

Date of Candidacy Examination: _____
Research Committee Approval Number: _____
Final Approval of Candidate's program and acceptance of
dissertation by the doctoral committee: _____

Date

COMMITTEE

Member Name (List Chair First)	Signature	Pass/Fail

Return form to meeg@uark.edu or to MEEG 204.