

**Framingham State College**  
**Office of Graduate Studies**  
**100 State Street, Framingham MA 01701-9101**

**Master's Degree**  
**Comprehensive Examination\*** and  
**2009 Commencement\*\*** APPLICATION

<b>For Office Use Only</b>	
FSC ID: _____	Date of Admit: _____
Record Payment Information:	
Check # _____	Amount _____
Transit # _____	Date of Check _____
Diploma Batch #: _____	

- I am in a program **requiring** a comprehensive examination\*. A check for \$160.00 is enclosed. (Deadline for Summer 2008 is April 15, 2008; deadline for Fall 2008 is August 15, 2008; and deadline for Spring 2009 is January 15, 2009)
- I am in a program that **does not require** the examination. A check for \$35.00 is enclosed for Commencement.\*\* (Applications must be received one month into the last semester of study to ensure that the diploma is available at graduation.)

**PLEASE PRINT YOUR NAME EXACTLY AS IT SHOULD APPEAR ON YOUR DIPLOMA**

Name \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_  
Street City/Town Zip Code

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Area Code/Number Area Code/Number

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_ E-Mail \_\_\_\_\_

Degree Program \_\_\_\_\_ Expected Date of Graduation \_\_\_\_\_

Courses/Requirements Remaining \_\_\_\_\_

**Section I: For those students whose program requires a comprehensive examination.**

The following panel information applies to all students who must complete the comprehensive examination in order to graduate. Curriculum and Instructional Technology Masters students will take their online exam on the first Saturday of April (for Spring); August (for Summer); and December (for Fall), panel members are not required for this program. For general information about the CIT exam visit: [www.academicsonline.org/MEDportcomp.htm](http://www.academicsonline.org/MEDportcomp.htm).

- I plan to seek an additional teacher license in \_\_\_\_\_ as a result of this degree.
- I will be taking the comprehensive examination as arranged by my advisor.
- I will be taking an oral or written examination as I have arranged it.

Exam Date \_\_\_\_\_ Time \_\_\_\_\_ Place \_\_\_\_\_

Panel Member Chairing Exam \_\_\_\_\_ Initials \_\_\_\_\_

Second Panel Member \_\_\_\_\_ Initials \_\_\_\_\_

Third Panel Member \_\_\_\_\_ Initials \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**Approved to take Comprehensive Exam:**

Associate Dean Signature \_\_\_\_\_ Date \_\_\_\_\_

**IMPORTANT INFORMATION REGARDING THE COMPREHENSIVE EXAMINATION**

A three-member panel is required except in repeat examinations where a panel of five, including the associate dean, is required. In the case of the M.Ed., one panel member must represent the Education Department while the other two must represent the discipline.

**Section II: For those students whose program does not require a comprehensive examination.**

**Approved to Graduate upon successful completion of:** \_\_\_\_\_

Associate Dean Signature \_\_\_\_\_ Date \_\_\_\_\_

