

MATHEMATICS DEPARTMENT

Graduate Office

Math 206 • 621-2068 • e-mail: gradcoord@math.arizona.edu

## Committee Approval Form for MS Thesis As an Assessment Option for the PhD Qualifying Exams

NAME OF STUDENT: \_\_\_\_\_

Students who are planning to use an MS thesis as one of their assessment options for the PhD qualifying exams must obtain the signatures of their thesis committee members indicating their willingness to serve on this committee and their understanding that the MS thesis is being used as an assessment option for the PhD qualifying exams. The signature of the Associate Head for the graduate program is also required.

The thesis committee must consist of at least three tenured or tenure-track faculty members in the Mathematics Department, including the chair. Exceptions to this rule may be considered by the Graduate Committee.

As with the written qualifying exams, students using the MS thesis as an assessment option will be given a grade of "fail", "pass" or "high pass". To successfully complete the PhD qualifying exams, students must receive two high passes and one pass or better on their assessment options.

After the MS thesis defense the MS thesis committee will give the student a grade of "fail", "pass" or "high pass." The criteria for pass and high pass are as follows.

***Pass:*** *the thesis is acceptable for the MS degree.*

***High Pass:*** *the quality of the thesis indicates the student is capable of PhD level work. The thesis need not contain original work, but the quality should indicate that the student has the potential for such work.*

The grade is determined by a vote of the thesis committee. A grade of "high pass" requires a unanimous vote of high pass or a vote of high pass from all but one member of the committee. A grade of "pass" requires a unanimous vote of pass or high pass or a vote of pass or high pass from all but one member of the committee.

**COMMITTEE SIGNATURES:** (please PRINT your names after your signatures)

Committee Chair	Print Name	Date
Member	Print Name	Date
Member	Print Name	Date
Member (optional)	Print Name	Date

***Please return this form to the Mathematics Graduate Coordinator (Room 206).***

-----

***Approved***

\_\_\_\_\_  
Associate Head for the Graduate Program

\_\_\_\_\_  
Date