

**WAIVER OF FINAL EXAMINATIONS FOR THE DEGREE OF  
DOCTOR OF:  PHILOSOPHY  MUSICAL ARTS**

Name of Candidate \_\_\_\_\_  
Last First Middle

Title of Dissertation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To the Dean of the Graduate Division:

The doctoral committee requests that the candidate's final examination be waived.

Signature of members <i>(please press firmly)</i>		Waived? <i>(yes or no)</i>	
_____	_____	___ yes	___ no
Type or print Name	Signature		
_____	_____	___ yes	___ no
Type or print Name	Signature		
_____	_____	___ yes	___ no
Type or print Name	Signature		
_____	_____	___ yes	___ no
Type or print Name	Signature		
_____	_____	___ yes	___ no
Type or print Name	Signature		

The committee therefore recommends that the degree be  conferred  denied.

\_\_\_\_\_ Signed: \_\_\_\_\_ Date \_\_\_\_\_  
Type or print Name Chairperson of Committee

\_\_\_\_\_ Signed: \_\_\_\_\_ Date \_\_\_\_\_  
Type or print Name Chairperson of Department

The above named candidate has met all the requirements of the major department and those of the Graduate Division. I concur with the recommendation of the doctoral committee that the final examination be waived. The degree of Doctor of \_\_\_\_\_ with a major in \_\_\_\_\_ will be conferred and dated \_\_\_\_\_.

Approved: \_\_\_\_\_ Date \_\_\_\_\_  
Dean of the Graduate Division

*Send original and copy to the Graduate division. After approval by the Graduate Dean, the copy will be returned to the department.*  
*(rev. 11/04)*