



# MASTER'S NON-COURSE REQUIREMENTS

Student's Name: \_\_\_\_\_

GNumber: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Mason E-mail: \_\_\_\_\_

Program of Study: \_\_\_\_\_

| Requirement Met       | Not Required | Additional Information<br>(Ex. Microeconomics, Oral, Written, German, Fine Arts) | Date Met |
|-----------------------|--------------|--|----------|
| Comprehensive Exam #1 |              |  |          |
| Comprehensive Exam #2 |              |  |          |
| Language Proficiency  |              |  |          |
| Master's Project      |              |  |          |
| Research Tool         |              |  |          |
| Scholarly Paper       |              |  |          |
| Seminar Attendance    |              |  |          |
| Other:                |              |  |          |
| Other:                |              |  |          |

Comments: \_\_\_\_\_

Department Approval: \_\_\_\_\_ Date: \_\_\_\_\_

*After approval signatures have been obtained, return this form to the Office of the University Registrar, Student Union Bldg 1, Room 2101 MS 3D1, Fax (703) 993-4668.*

Registrar's Initials: \_\_\_\_\_/\_\_\_\_\_