

Specialization Exam Report

DEPARTMENT OF MEDIA, CULTURE, AND COMMUNICATION

Student Information				
First Name		Last Name		N#
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Date of Oral	Review	Faculty Readers Names	<u>.</u>	
Date of Otal Neview		1 dounty froudere frames	- deally reduce rained	
Instructions: Complete the information in the boxes above and attach your bibliographies. Obtain the signatures of your specialization exam advisors at the oral defense. Submit this form to the department's graduate administrator. Outcome of Written Exam				
Area 1:				
	Pass			
	Fail			
Area 2:				
П	Pass			
	Fail			
Outcome of Oral Defense				
	Pass			
_	Fail			
_				
Faculty Signature			Faculty Signature	