

Capstone Completion Form
This form must submitted for completion of any degree requiring a capstone experience.

otudent Name:	G Number:
Program: This student has successfully con	npleted and defended a <u>THESIS</u> entitled:
This student has successfully con	npleted and defended a capstone <b>PROJECT</b>
This student has successfully con	npleted an <u>INTERNSHIP</u>
This student has successfully con	npleted a <b>PORTFOLIO</b>
This student has successfully con Please attach proof of certification	npleted the following <u>CERTIFICATION</u> (s). completion.
This student has successfully cor	mpleted a <b>COMPREHENSIVE EXAM</b>
	y completed/defended a capstone requirement as remove this student from the graduation list for the
Thesis/Project/Internship/Portfolio/Caps	stone Advisor Date
Thesis Committee Member (required for	r thesis) Thesis Committee Member (required for thesis)
Graduate Dean	 Date

NOTE: This form must be completed, signed, and forwarded to the graduate school (WITH <u>THREE</u> COPIES OF THE THESIS OR FINAL PROJECT) no later than 10 class days before the end of the semester the student wishes to graduate. The student must also email an electronic copy of the thesis or final project to graduate@missouriwestern.edu. The thesis must comply with the standards of the graduate school as well as any program requirements.