DePaul University

College of Science and Health
Office of Advising and Student Services
1110 W Belden Ave. Suite 400, Chicago, IL 60614
Phone: (773) 325-8490
CSHGraduation@depaul.edu

Final Requirements Report

This report is used to indicate satisfactory completion of the student's final degree requirement(s).
Please click typewrite icon above, enter information and return via email to
CSHGraduation@depaul.edu - Attn: Associate Director of Graduate Student Services.

Student Name:	DePaul ID:
Program:	Date:

Verify Completion of Degree Requirements (check all that apply):			
Have you completed the program's Required Coursework?	☐ Yes	☐ No	☐ N/A
Have you completed the Doctoral Dissertation, Master's Thesis, Scholarly Leadership Project, or Program's Final Writing Project?	☐ Yes	☐ No	☐ N/A
Have you successfully defended your Thesis or Dissertation?	☐ Yes	☐ No	☐ N/A
Have you passed the Comprehensive Written Exam(s)?	☐ Yes	☐ No	☐ N/A

Distinction: ☐ With Distinction (M.A./M.S. Only) **or** ☐ Standard (M.A./M.S. Only)

Verify Title of Thesis/Dissertation/Scholarly Leadership Project:
Full Title*:

Examiner(s), Advisor(s) or Program Director	Signature	Date

*Please note the character limit to appear on your official transcript is 70 including spaces between words.