

Department of East Asian Languages & Cultures
M.A. DEGREE REQUIREMENTS CHECKLIST

NAME _____ UNI _____

ADVISOR _____ DATE OF MATRICULATION _____

1. REQUIRED COURSEWORK (Not including language courses)

| CONTENT COURSES (Not including methodology course) | SEMESTER/YEAR TAKEN |
|--|---------------------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| METHODOLOGY COURSE | |
| | |

2. LANGUAGE REQUIREMENT

| LANGUAGE | HIGHEST LEVEL COMPLETED – MODERN | HIGHEST LEVEL COMPLETED – CLASSICAL |
|-----------------------------------|----------------------------------|-------------------------------------|
| <input type="checkbox"/> CHINESE | | |
| <input type="checkbox"/> JAPANESE | | |
| <input type="checkbox"/> KOREAN | | |
| <input type="checkbox"/> TIBETAN | | |
| OTHER: | | |

3. M.A. THESIS REQUIREMENT

| THESIS TITLE | DATE COMPLETED |
|----------------------------------|----------------|
| | |
| THESIS COURSES | SEMESTER/YEAR |
| EAAS GR6990 M.A. Thesis Research | |
| EAAS GR6991 M.A. Thesis Writing | |

4. RESIDENCE UNITS

| | |
|------------------------------------|--|
| DATE TWO RESIDENCE UNITS COMPLETED | |
|------------------------------------|--|

To be completed by the advisor: THESIS NOMINATED FOR HONORS? YES* NO

I HEREBY CERTIFY THAT THIS STUDENT HAS SATISFACTORALY COMPLETED THE M.A. DEGREE REQUIREMENTS.

SIGNED _____ DATE _____
Thesis Advisor

APPROVED BY _____ DATE _____
M.A. Program Director

*IF NOMINATED FOR HONORS, APPROVED BY _____ DATE _____
Director of Graduate Studies

Please submit this form, typed, with a copy of your academic transcript to 407 Kent Hall.