



MA EXAM SCHEDULING FORM

Student Name: _____ **Date:** _____

Student Specialization Area: _____

Exam Type (*Check One*): [] Thesis [] Project

Title: _____

Advisor: _____

Second Reader Requested : _____

(A second reader in addition to the advisor is required for M.A. Exams; second readers must be approved by the Dean. If left blank, a second reader will be assigned.)

Exam Scheduling

Once the second reader has been approved, students and advisors may schedule the exam at a mutually agreed upon time. If you require assistance in scheduling, or need to reserve a room on campus, please fill out the information below and contact Andrea Jones (ajones@hartfordinternational.edu)

Three dates/times at which both student and advisor are available (*Exam is typically 90 minutes.*):

1. _____

2. _____

3. _____

****Office Use Only****

Room booking has been made for: _____

Student, Advisor and Second Reader have been notified of confirmed date: _____