



COLLEGE of FINE ARTS

Office of the Dean
TCU Box 298000
Fort Worth, TX 76129
817-257-2787

DMA Oral Exam Grade Report

ID#: _____

Last First Middle

The above listed student has satisfactorily completed the oral examination for the:

DMA Degree with a Major in: _____

Date of Defense: _____
Month Day Year

DMA Document Title: _____

		Dissertation Grades							
_____ Committee Chair/Major Professor	_____ Date	_____ Course # Term Hours Grade				_____ Course # Term Hours Grade			
_____ Committee Member	_____ Date	_____ Course # Term Hours Grade				_____ Course # Term Hours Grade			
_____ Committee Member	_____ Date	_____ Course # Term Hours Grade				_____ Course # Term Hours Grade			
_____ Committee Member	_____ Date	_____ Course # Term Hours Grade				_____ Course # Term Hours Grade			
_____ Committee Member	_____ Date	_____ Course # Term Hours Grade				_____ Course # Term Hours Grade			
_____ Director, School of Music	_____ Date	_____ Course # Term Hours Grade				_____ Course # Term Hours Grade			

TO THE REGISTRAR: The above listed student has successfully defended their DMA Project for the DMA program. All signatures must be obtained before this form becomes valid.

Notes: