



Cornell University

Graduate Field in City and Regional Planning
109 Sibley Hall
Ithaca, New York 14853

SCHEDULE OF EXAM FORM (MRP STUDENTS ONLY) FORM M2

INSTRUCTIONS

- * Use this form to schedule the final defense for the Master of Regional Planning(MRP) degree.
- * This form **must** be signed by all members of the student's Special Committee, the DGS and the GFA. All information on this form should be printed or typed. If you have questions, please call Tina Nelson 607-255-6848.
- * Submit the completed form to the **Graduate Field Administrator, Tina Nelson, 109 Sibley Hall, at least seven calendar days prior** to the exam.
- * We recommend that you send an e-mail reminder of the upcoming exam to your committee and field.
- * For detailed policy information, refer to the Code of Legislation, available at the Graduate School and on the Web at www.gradschoolcornell.edu.

BIOGRAPHICAL INFORMATION

| | | | |
|------------------------|----------------------|----------------------|--------------|
| Cornell ID # _____ | Net ID _____ | E-Mail address _____ | |
| Last Name _____ | First Name _____ | Middle Initial _____ | Gender _____ |
| Academic Program _____ | Drop-down List _____ | | |

EXAMINATION

Professional Master's (Degree Sought:)

| | | |
|---|---|--|
| Date Scheduled: <input style="width: 100%;" type="text"/> | Time: <input style="width: 100%;" type="text"/> | Room and building: <input style="width: 100%;" type="text"/> |
|---|---|--|

COMMITTEE INFORMATION AND SIGNATURES

Another member of the Graduate Faculty can, if necessary, sign for a committee member if the committee member has agreed to the scheduling

| Special Committee Chair (name) | Net ID | Special Committee Chair signature | Date |
|--|--------|---|-------|
| _____ | _____ | _____ | _____ |
| Special Committee member (name) | Net ID | Special Committee member signature | Date |
| _____ | _____ | _____ | _____ |
| Special Committee member (name) | Net ID | Special Committee member signature | Date |
| _____ | _____ | _____ | _____ |
| Special Committee member (name) | Net ID | Special Committee member signature | Date |
| _____ | _____ | _____ | _____ |
| Special Committee member (name) | Net ID | Special Committee member signature | Date |
| _____ | _____ | _____ | _____ |
| Field Director of Graduate Studies (name) | Net ID | Director of Graduate Studies signature | Date |
| _____ | _____ | _____ | _____ |
| Field GFA or Administrative Manager (name) | Net ID | GFA or Administrative Manager signature | Date |
| _____ | _____ | _____ | _____ |

Field Use Only

Entered in Database _____
Date Processed _____