University of Manitoba | Faculty of Graduate Studies

Report on Master of Engineering Project and Report

This is to report that the student whose name appears below has completed the Master of Engineering Project and Report with the result indicated below.

Student Name (**LAST**, First) _____

Student Number _____

Major Department/Unit _____

Indicated result in the category of Pass or Fail:
Project and Report (GRAD 7050 - 6 Cr. Hrs.)

◯ **Pass**

Please indicate if this was a: ◯ First Attempt ◯ Second Attempt

Date student completed requirements _____ (*MM/DD/YYYY*)

◯ **Fail**

Please indicate if this was a: ◯ First Attempt ◯ Second Attempt

Date student completed requirements _____ (*MM/DD/YYYY*)

Committee of Examiners

Names	Department/Unit	Signatures
_____ Advisor	_____	_____
_____ Co-Advisor (if applicable)	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Department/Unit Head Signature _____ Date _____ (*MM/DD/YYYY*)

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