**[College of Communication Arts and Sciences](#topofpage)**

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**FORM I: REQUEST FOR ADVISOR AND PROGRAM PLAN\***

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, request that

 (Please print name)

Dr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ be appointed as my

 (Print name)

academic advisor for the MA program in Communication.

I have selected: Plan A \_\_\_\_\_\_\_ (requiring thesis)

 Plan B \_\_\_\_\_\_\_ (requiring final written exam)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Student's signature date Advisor's signature date

**APPROVED:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Director of Master’s Studies date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Chairperson, Dept. of Communication date

**\*Note: This form should be completed no later than 10 credits into your program.**

Revised 8/22

**College of Communication Arts and Sciences**

**Department of Communication**

**Master’s Program**

**FORM II: REQUEST FOR APPOINTMENT OF EXAMINING COMMITTEE\***

Note: Persons serving on the committee must be MSU regular faculty1

**For Plan A (Thesis Option)**, MA students are required to have two (2) committee members (one may be from outside the department), plus an advisor. **For Plan B (Final Written Examination option)**, MA students are required to have two (2) committee members plus an advisor, all of whom must be from the Department of Communication.

1 Exceptions can be made with approval from the department, college, and The Graduate School. For more information, please contact the Director of the Master’s in Communication Program.

The following faculty agree to serve on my Examining Committee, and I request that they be appointed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student's name — please print Student's signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Member selected — please print Member's signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Member selected — please print Member's signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Advisor's signature date

APPROVED:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Director of Master’s Studies date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Chairperson, Dept. of Communication date

**\*Note: This form should be completed no later than 10 credits into the program.**

Revised 8/22

**College of Communication Arts and Sciences**

**Department of Communication**

**Master’s Program**

**FORM III: GRADPLAN**

* Effective Fall 2021 the university requires you to complete your Program of Study (GRADPLAN) in your student portal, <https://student.msu.edu>,. There is an instructional pdf on the process found online at <https://sis.msu.edu/_assets/documents/graduate/GR-GradPlanOverview-Student.pdf>.
* You must complete the GRADPLAN by the time you have completed 10 credits in the Master’s program and have submitted your hardcopy forms for advisor and committee to the Academic Programs Coordinator.
* The Academic Programs Coordinator must enter your program track and advisor’s information into student.msu.edu before you can begin your GRADLAN.
* You must enter your committee members in student.msu.edu and route for their approval in student.msu.edu before you can do your GRADPLAN.
* In GRADPLAN, your coursework must be at the 400 level or higher. Your selection of courses should be done in conjunction with your advisor and committee.
* You must select a program track, Thesis or Exam.
* Then select your concentration, if you have selected the Exam Track; Knowledge Utilization or effective Fall 2024, the new concentration, Communication Science Research & Analytics Concentration will be available.
* The GRADPLAN should contain all courses you have taken and plan to take to for a minimum of 30 total credits. This can be modified in GRADPLAN in the future if your courses are not offered or your interests have changed.
* Once you submit the online form it routes in this order, 1) Academic Programs Coordinator, 2) your committee, 3) COM MA Director, 4) CAS Associate Dean, 5) Registrar, then it is approved and posted to your portal. SUCCESS!

Revised 8/23

**College of Communication Arts and Sciences**

**Department of Communication**

**Master’s Program**

**FORM IV: REQUEST FOR MODIFICATION OF THE MASTER’S PROGRAM**

The following modifications are recommended in the Master’s program of study for

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 Print Student's name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_

Student's signature date Advisor's signature date

I. CHANGE IN ADVISOR OR COMMITTEE MEMBERSHIP(specify change and reason; signature of new advisor/member required) Note: Please see the university guidelines for change in advisor/committee member at G.S.R.R. 2.4 for more information on MSU policies related to guidance committees (<http://grad.msu.edu/gsrr/>).

**Drop** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Drop** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Print name Print name

**Add** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Add** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reason**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Reason**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of New Member Signature of New Member**

II. CHANGE IN COURSE REQUIREMENTS (specify changes)

**Deletions** Credits **Additions** Credits

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_

**III. CHANGE IN PROGRAM PLAN** Change from Plan \_\_\_\_\_\_ to Plan \_\_\_\_\_\_

APPROVED:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

**Director of Master’s Studies date**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

**Chairperson, Dept. of Communication date** Revised 8/14

**College of Communication Arts and Sciences**

**Department of Communication**

**Master’s Program**

**FORM V: Defense of Thesis Proposal**

The Guidance Committee is pleased to announce that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Please Print Name

successfully defended his/her thesis proposal on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date of Defense

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Chair of Guidance Committee date

Members of Committee Signatures

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Approved**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Director of Master’s Studies date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Chairperson, Dept. of Communication date

Revised 8/14

**College of Communication Arts and Sciences**

**Department of Communication**

**Master’s Program**

**FORM VI: ELIGIBILITY TO HOLD FINAL EXAM OR THESIS DEFENSE**

I request The Office of Academic Programs for the Department of Communication

to determine the eligibility of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to take the

 Print Student’s Name

Master’s degree final examination or defense on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_.

 date time room

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Student's signature & date Advisor's signature & date

The Office of Academic Programs for the Department of Communication has reviewed the record of the above-named student and makes the following decision:

\_\_\_\_\_\_\_ The above-mentioned student will have completed all requirements by the end of this semester and is therefore eligible to take the final oral examination. This assumes that present courses will be completed satisfactorily. Should the courses not be completed satisfactorily, this eligibility is void, and the examination must be retaken.

\_\_\_\_\_\_\_ The student has not completed all requirements. The examination shall be delayed until the following requirements are met:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

APPROVED:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Director of Master’s Studies date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Chairperson, Dept. of Communication date

**Note: This form must be submitted no less than two weeks before the requested examination date.**

Revised 8/22

**College of Communication Arts and Sciences**

**Department of Communication**

**Master’s Program**

**FORM VII: RESULTS OF FINAL EXAMINATION (Thesis OR Non-thesis tracks)**

PLAN A and B:

This is to certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has

 Print Student’s name

successfully completed the final examination for the Master’s degree in the Department of Communication.

GRADE of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ is awarded.

 (Numerical)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Advisor's signature date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Committee member's signature Committee member's signature

APPROVED:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Director of Master’s Studies date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Chairperson, Dept. of Communication date

Revised 8/22