

**Biological Sciences Department**

**C-Form: Verifying Completion of Graduate Program Requirements**

**for Master of Sciences Degree**

**Due Date:** <http://grad.buffalo.edu/succeed/graduate/requirements.html>

under Master’s requirements

# Complete personal information and sections 1 and 2 below:

For Degree Conferral on: February 1, 20 June 1, 20 August 31, 20

Student Name Person Number

1. **Program Requirements:** I have examined the UB transcript and record of the above-named student and confirm that the student has completed all departmental and program requirements for the:

(degree type) MS in (program title) Biological Sciences in the department of Biological Sciences Chair/Dir. of Grad. Studies Paul Cullen

Name Signature Date

# Complete and sign: Approval of Capstone Work:

Title of Capstone Work: \_\_\_\_\_\_

On (**date**) we received the above-named student’s capstone work which has been examined in content and form and deemed acceptable to fulfill the capstone requirement for the (degree type) MS in (program title) Biological Sciences

Major Advisor(s)

Name Signature Date

Committee Member

(If required by department) Name Signature Date

Chair/Dir. of Grad. Studies Paul Cullen

Name Signature Date

# Submit this completed Conferral form to the Graduate Secretary in 109 Cooke Hall or by email: met8@buffalo.edu

# \*For department use only

*Revised 7/14/2021*