

*University of Nevada, Las Vegas*

**Master of Music Education - Written Comprehensive Assessment**

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Date

1. Do the answers provided by the student adequately address the questions posed?
2. Is the depth and scope of the answers appropriate to the subject?
3. Does the student display the ability to intellectually synthesize the material?
  - Pass
  - Conditional Pass – requiring an oral comp assessment within the week.
  - Fail – requiring a full re-examination by the student in the next semester.

If the determination is a Conditional Pass or a Fail, please indicate specific areas that need to be addressed:

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

\_\_\_\_\_  
Signature Committee Member