**REPORT ON COMPLETION OF MANUSCRIPT**

**FOR THE DEGREE OF**

**MASTER OF FINE ARTS**

**IN**

**CREATIVE WRITING AND WRITING FOR THE PERFORMING ARTS**

*To be presented to the Graduate Division Academic Affairs Office*

*as confirmation of manuscript completion.*

 Student Name:

 Student ID:

 This is to certify that the above student has completed the manuscript for the
 Master of Fine Arts in Creative Writing and Writing for the Performing Arts on

 *Date*

 *Manuscript Chairperson or Graduate Advisor’s Signature*