

Art Submitted for the Permanent Records School of Art in partial fulfillment of the requirements for the degree of Master of Fine Arts in the Graduate College at the University of Arizona

DATE OF THESIS SHOW: _____

DATE OF GRADUATION: _____

NAME: _____

AREA: _____

SLIDE LIST

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***Include:** Slide Name, Medium, Dimension, and other pertinent information on this sheet as well as on each slide, submit all slides in a protective slide sheet.*

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