Results of the Comprehensive Examination

The Chair of the Examining Committee is to submit this form to the Graduate Program Director, and a copy to the student, within one week of the examination.

We, the undersigned, as the Examining Committee for ________________________________, report the results of the Comprehensive Examination held on ________________________________ (date) are as follows (check one):

___ Unconditional pass.

___ Conditional pass. The conditions must be clearly stated, i.e., the exact nature of the deficiency must be described along with a mechanism(s) to repair this deficiency. Conditions must be met within one year. The Chair of the Examining Committee must provide the Graduate Program Director with written notification when the student has resolved the conditional pass.

___ Re-examination. Student will be re-examined within one semester at which time the Examining Committee will render a decision. Please summarize briefly the criticisms that led to this decision and give an estimate of the date of re-examination.

___ Failure. The Examining Committee has decided that the student does not have the potential to complete the degree program. Please indicate why the student failed the examination.

Comments:_______________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Signatures (please print/type each committee member's name under signature line):

______________________________________  __________________________________________
Chair, Examining Committee

______________________________________  __________________________________________

______________________________________  __________________________________________

Last revised April 18, 2000