

## Report on the Final Examination for the Doctoral Degree

Student Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Student ID (if known):         and/or NetID (if known):

Email: \_\_\_\_\_ Field of Study \_\_\_\_\_

This report must be submitted to the Office of the Registrar whether the examination has been passed or failed. It is a required document for the audit of records for a Doctoral degree conferral. The original should be submitted to the Office of the Registrar and a copy is to be retained by your major advisor. It must be submitted no later than the appropriate August, December, or May conferral date.

**If this report is submitted after the appropriate deadline, your degree will not be conferred until the following conferral date.**

### 1. FINAL EXAMINATION

A. Date(s) given (mm/dd/yyyy) \_\_\_\_\_

B. Faculty members participating (minimum of five, including members of advisory committee.)


PLEASE TYPE OR PRINT NAMES

### 2. RESULTS OF THE EXAMINATION

PASS

FAIL

### 3. COMMENTS \_\_\_\_\_

Date: \_\_\_\_\_

### ADVISORY COMMITTEE

ADVISOR'S NAME (PRINTED)

ORIGINAL SIGNATURE (REQUIRED)

MAJOR ADVISOR

\_\_\_\_\_

\_\_\_\_\_

ASSOCIATE ADVISOR

\_\_\_\_\_

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ASSOCIATE ADVISOR

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ASSOCIATE ADVISOR

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ASSOCIATE ADVISOR

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