

Report on the General Examination for the Doctoral Degree

Student Name: _____ Phone: _____

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

Email: _____ Field of Study _____

Submit this report to the Office of the Registrar immediately following the examination. The examination may be given in several sections; however, one report should cover the entire examination. The report must be submitted whether the examination, as a whole, has been passed or failed. The original should be submitted to the Office of the Registrar and a copy is to be retained by your major advisor. This report must be submitted within thirty days of the examination for you to be eligible for retroactive Graduate Assistantship pay.

1. GENERAL EXAMINATION

A. DATE GIVEN: WRITTEN SECTION _____ ORAL SECTION _____

B. FACULTY MEMBERS PARTICIPATING (minimum of five, including members of advisory committee.)

PLEASE TYPE OR PRINT NAMES

2. RESULTS OF THE EXAMINATION

(PLEASE CHECK ONE)

PASS

FAIL

3. COMMENTS _____

Date: _____

ADVISORY COMMITTEE

ADVISOR'S NAME (PRINTED)

ORIGINAL SIGNATURE (REQUIRED)

MAJOR ADVISOR

ASSOCIATE ADVISOR

ASSOCIATE ADVISOR

ASSOCIATE ADVISOR

ASSOCIATE ADVISOR
