

Graduate Program in Gender, Feminist and Women's Studies

**PhD Comprehensive Examination Evaluation Form**

Student: \_\_\_\_\_

Date Written Exam was completed: \_\_\_\_\_

Date Oral Exam was completed: \_\_\_\_\_

Results:

Pass

Pass with Conditions: (Please specify work to be done):

Unsatisfactory: (Student may retake the exam within three months. Two examinations ranked "unsatisfactory" result in a failure of the Comprehensive examination, and the student will be required to withdraw from the Program):

Names and Signatures of the examining committee:

Supervisor: \_\_\_\_\_  
Name Signature

Committee Member: \_\_\_\_\_  
Name Signature

Committee Member: \_\_\_\_\_  
Name Signature

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

The supervisor ensures this form is submitted to the Program office.