

Comprehensive Examination: Record of Completion

MEMO

To: Graduate Program Committee

From: Supervisory Committee

Date: _____

Re:

PhD Student: _____

SISID: _____

This confirms that the Supervisory/Examining Committee of the above candidate has read and reviewed the comprehensive examination questions. We hereby recommend to the Graduate Executive Committee the approval of the enclosed comprehensive questions and reading lists in the following categories, selected by the candidate.

Question 1:

Oral Written Date accepted _____

Pass Fail

Question 2:

Oral Written Date accepted _____

Pass Fail

Supervisor:	Date: (mm/dd/yyyy)
Member:	Date: (mm/dd/yyyy)
Member:	Date: (mm/dd/yyyy)
GPD:	Date: (mm/dd/yyyy)

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