

EVALUATION OF QUALIFYING EXAMINATION

This form should be completed immediately after the Exam (which is required to be taken by the end of the fifth semester) and placed in the Graduate Administrators mailbox.

TO BE FILLED OUT BY STUDENT:
Student Name:
Qualifying Examination Committee Chair Name:
Qualifying Examination Committee additional members:
Area of Examination:
Examination Date:
TO BE FILLED OUT BY QUALIFYING EXAMINATION COMMITTEE CHAIR:
The student has (circle one): PASSED FAILED
Committee Report Summary:
Signature of Committee Chair: