REPORT OF QUALIFYING/CANDIDACY EXAMINATION

Name of Candidate: ____________________________________________________________
Degree: __________________________ Discipline: _______________________________
Date and Place of Examination: ______________________________________________
Examination Topic: __________________________________________________________

EXAMINATION PANEL

1. ________________________________________
2. ________________________________________
3. ________________________________________
4. ________________________________________
5. ________________________________________

DECISION OF EXAMINATION PANEL:

Passed ( ) Failed ( )

Remarks: ________________________________________________________________
________________________________________________________

SUBMITTED BY: NOTED BY:

______________________________ ________________________________
Chair Chair
Examination Panel Graduate Committee
Date: ________________________ Date: ________________________