



Office of the Associate Dean for Mentoring Academic Progress and Advancement

GRADUATE OFFICE

REPORT OF QUALIFYING/CANDIDACY EXAMINATION

Name of Student: _____ Degree Program: _____

Date of Exam: _____

Examination Topic: _____

EXAMINATION PANEL

PANEL MEMBER/S	SIGNATURE

Decision of Examination Committee: PASSED FAILED

REMARKS: _____

Submitted by:

Deputy Director for Academic Affairs
Chairman, Examination Panel

Chair, Graduate Committee

Date: _____

Date: _____