



PhD Comprehensive Examination Report

Name of Candidate: _____ Student ID: _____

Thesis Title: _____

Date/Time of Examination: _____ Location: _____

Committee Members: _____ (Supervisor)

_____ (Chair)

- Result (select one):
- allowed to proceed with his/her PhD program
 - improve his/her knowledge in designated areas
 - asked to withdraw from program

Comments:

Date: _____ Signed: _____

Chair

Examiners