

This form is to be submitted to the Graduate Program Specialist **each time** the student attempts the preliminary examination.
This form certifies the results of the student's preliminary examination.

A signed form with a majority vote of "Pass" (oral and written) must be on file before the student may progress to Part 2 of the Qualifying Exams (Research Proposal).

Student Information:

Name: _____

Emplid: _____

Student E-mail: _____

Department: _____

Major: _____

Results:

Please select one for each of the following sections and indicate the date when the decision was made.

Written Preliminary Exam: Pass Fail Re-examine **Date:** _____

Oral Defense of Preliminary Exam: Pass Fail Re-examine **Date:** _____

Major Professor

Signature

University Representative

Signature

Committee Member

Signature

Committee Member

Signature

Committee Member

Signature