

NOTIFICATION OF QUALIFYING EXAM RESULTS

The purpose of this form is to notify students of qualifying exam results. The completed form should be signed by the Committee Chair and Associate Dean.

Student Name:

Student Number:

Program of Study:

Academic Advisor:

Committee Chair:

Department Chair:

We, the undersigned, report that you have completed your qualifying exam with the following results:

Date of Exam:

Exam Section

Grade/Score

- 1.
- 2.
- 3.
- 4.
- 5.

Overall Score:

Check One:

You passed the exam and are eligible
to apply for candidacy.

You did not pass the following section(s)
and must retake this/these section(s)

Section(s) that needs to be re-taken:

You must complete the following remedial Work:

Approval Signatures:

Committee Chair:

Date:

Associate Dean:

Date: