PHD ORAL EXAM

Name of Student:	Date of Exam:		
Major Program:	Minor or Supporting Field(s):		
Major Advisor:			
Recommended Action:			
 [] Pass. a. The student receives an average of 5 or be done by the student unless defined b. Comments, if any: 	r 4 and passes the examination. No further work need by the committee.		
	nd qualifications will be listed for the student to review. nation in order to retake that portion of the exam.		
[] Fail. a. The student receives an average of 2 (n			
Committee Chair	Committee Member		
Committee Member	Committee Member		
Committee Member	Committee Member		
Complete after qualifications have been met:			
 Date Completed	Committee Chair		

Student:		
Date of Examination:		
Please circle one of the following i	indicating the student's performan	ce.
<u>Pass</u>	Pass with Qualifications	<u>Fail</u>
(5) Outstanding	(3) Retake a Portion	(2) Marginal
(4) Adequate		(1) Poor
Signature of Committee Member		Date
Name (please print)		

Student:		
Date of Examination:		
Please circle one of the following i	indicating the student's performan	ce.
<u>Pass</u>	Pass with Qualifications	<u>Fail</u>
(5) Outstanding	(3) Retake a Portion	(2) Marginal
(4) Adequate		(1) Poor
I note the following strengths and weaknesses:		
Signature of Committee Member	_	Date
Name (please print)		

Student:		
Date of Examination:		
Please circle one of the following indicating the student's performance.		
<u>Pass</u>	Pass with Qualifications	<u>Fail</u>
(5) Outstanding	(3) Retake a Portion	(2) Marginal
(4) Adequate		(1) Poor
I note the following strengths and	I weaknesses:	
Signature of Committee Member Name (please print)		Date

Student:		
Date of Examination:		
Please circle one of the following indicating the student's performance.		
<u>Pass</u>	Pass with Qualifications	<u>Fail</u>
(5) Outstanding	(3) Retake a Portion	(2) Marginal
(4) Adequate		(1) Poor
I note the following strengths and	weaknesses:	
Signature of Committee Member		Date
Name (please print)		

Student:		
Date of Examination:		
Please circle one of the following indicating the student's performance.		
<u>Pass</u>	Pass with Qualifications	<u>Fail</u>
(5) Outstanding	(3) Retake a Portion	(2) Marginal
(4) Adequate		(1) Poor
I note the following strengths and	I weaknesses:	
Signature of Committee Member Name (please print)		Date

Student:		
Date of Examination:		
Please circle one of the following i	indicating the student's performan	ce.
<u>Pass</u>	Pass with Qualifications	<u>Fail</u>
(5) Outstanding	(3) Retake a Portion	(2) Marginal
(4) Adequate		(1) Poor
I note the following strengths and weaknesses:		
Signature of Committee Member	_	Date
Name (please print)		