



OFFICE OF GRADUATE STUDIES & RESEARCH
Comprehensive Examination Application
For Ph.D. or Ed.D. Programs

Exam #: _____

REQUEST TO TAKE COMPREHENSIVE EXAM – Please Print

Name:	_____	Date	_____
Address:	_____	T#:	_____
City/State:	_____	Zip:	_____
Year Admitted:	_____	Degree Sought:	_____
Major Dept:	_____	Conc:	_____
Semester and Year of Exam	_____	Email Address:	_____
		(Print clearly)	_____
		Phone #:	_____

Eligibility Requirements: (1) Passed Qualifying Exams – Attach a copy of the notification letter, (2) Approved Program of Study – Attach a copy signed by the graduate Dean, (3) GPA – 3.00 or higher with no incomplete grades and no “C” grades, (4) Completed all core courses, (5) Completed 75% of major courses and 75% of elective courses, (6) Appropriate signatures below.

Area (Check one)

Curriculum and Instruction

Curriculum Planning _____
Elementary Education _____
Reading _____
Secondary Education _____

Educational Administration

K-12 Administration _____
Higher Ed. Administration _____

Psychology

Counseling Psychology _____
School Psychology _____

Applicant Signature _____ Date _____

Advisor Signature _____ Date _____

Department Head Signature _____ Date _____

College Dean _____ Date _____

EXAMINATION RESULTS

☐ Pass ☐ Fail ☐ No Show

Department Head _____ Date _____ College Dean _____ Date _____ Graduate Dean _____ Date _____

RECOMMENDATION

Student permitted to retake exam _____ **Next Exam Date** _____
Student dismissed from program _____

Department Head Signature _____ Date _____