

Committee Review of Oral Comprehensive Exam

Student's Name: _____ Date: _____

_____ Pass with Distinction Fields: _____

_____ Pass Fields: _____

****In the case of a Fail in one or more fields, the committee should clearly indicate:**

1. Whether or not the student is to be allowed to take the exam over
2. Any special conditions attached to retaking the exam (i.e.: Completion of additional course work, etc.)

****If the committee recommends a second exam in one or more fields, the student must retake both the oral and written portions of the comprehensive exam.**

_____ Fail Fields: _____

Recommendations and conditions:

Committee members:

