



Request for Qualifying Examination – Doctoral Degree

Submit typed original and one copy

Name		Student ID	
Program		Date	

The Department requests that the Qualifying Examination of the above named student for the doctoral degree be scheduled as follows:

Examination Information			
Day	Date	Time	Room

The program recommends the appointment of the examination committee listed below.

Examination Committee	
Major Professor	
Committee Member	
Committee Member	
Committee Member	
Committee Member	
Committee Member	

Major Professor

Graduate Coordinator

Department Chair

Dean of the College