

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

Exam #: \_\_\_\_\_

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**REQUEST TO TAKE COMPREHENSIVE EXAM – Please Print**

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

**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)

<b>Curriculum and Instruction</b>	<b>Educational Administration</b>
Curriculum Planning _____	K-12 Administration _____
Elementary Education _____	Higher Ed. Administration _____
Reading _____	<b>Psychology</b>
Secondary Education _____	Counseling Psychology _____
	School Psychology _____

_____ Applicant Signature	_____ Date	_____ Advisor Signature	_____ Date
_____ Department Head Signature	_____ Date	_____ College Dean	_____ Date

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**EXAMINATION RESULTS**

Pass \_\_\_\_\_  Fail \_\_\_\_\_  No Show \_\_\_\_\_

_____ Department Head	_____ Date	_____ College Dean	_____ Date	_____ Graduate Dean	_____ Date
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**RECOMMENDATION**

Student permitted to retake exam \_\_\_\_\_ Next Exam Date \_\_\_\_\_  
 Student dismissed from program \_\_\_\_\_

\_\_\_\_\_  
Department Head Signature \_\_\_\_\_ Date \_\_\_\_\_