Qualifying Exam Reporting Form

(for PhD students)

Doctoral students admitted into all PhD disciplines must pass a qualifying examination. The "qualifying exam" is a course-work based exam to test and demonstrate the doctoral student's proficiency in the foundational material of his or her discipline. This exam is normally taken within the first 2 years of enrollment after the student's program of foundation coursework has been substantially completed; please review specific guidelines for individual programs.

Scheduling a qualifying exam through the Office of Graduate Education is not required, but the results of any qualifying exam must be reported to the Office of Graduate Education by the department or program within one week of completion of the exam.

The report must be delivered by a department/program representative. No forms will be accepted from students.

Student Name: _____ Student ID: _____
(Print)

Department/Program: _____

Date of qualifying exam: _____

Student certification:
I have taken the qualifying exam for my PhD degree and been advised of the result.

Student Signature: _____ Date:_____

Department/program certification:

____ I certify that the student listed above has successfully completed the qualifying exam and is authorized to continue studies in the aforementioned PhD program.

____ I report that the student listed above has taken a qualifying exam but has failed to pass it wholly or in part. The student will be required to repeat all or part of the exam by this deadline _____.

____ I certify that the student listed above has taken the qualifying exam the maximum allowable times and has NOT successfully completed the qualifying exam(s) and is NOT authorized to continue studies in the aforementioned PhD program. A formal notification letter informing the student of the outcome, initiated by the department/program and signed by the Dean of Graduate Education, will be sent to the student.

_____ _____ _____
Major Professor or Exam Chair Signature | Print Name & Dept. | Date

_____ _____ _____
Dept. Head or Program Coordinator Signature | Print Name & Dept. | Date

Graduate Office Use: _____