

Comprehensive Exam Committee Form

Doctoral students must meet with 3 faculty members to form a tentative comprehensive exam committee (one may be from outside the RTF department). Please submit this form to the Graduate Coordinator at least two weeks before the scheduled time for your comprehensive exam.

Name of student: _____ EID _____

Faculty member #1
Name _____ Date/Time of Exam _____
Department _____
Email _____

Faculty member #2
Name _____ Date/Time of Exam _____
Department _____
Email _____

Faculty member #3
Name _____ Date/Time of Exam _____
Department _____
Email _____