



College of Community Innovation and Education

DOCTORAL COMPREHENSIVE EXAMINATION APPLICATION

Date of Exam _____ PID _____

Name _____ Phone _____

Knights Email _____

Specialization Area _____

PLEASE SELECT THE EXAM(S) YOU WILL BE TAKING:

PH.D. EDUCATION

- Written
- Oral

ED.D. EDUCATIONAL LEADERSHIP

- Core Exam (5 hours)
- Specialization Exam (3 hours)
- Research Exam (take home) or Research Competency Confirmation

Applicant Signature Date

Advisor Signature Date

Doctoral Program Coordinator Date

Advisor Notes:

Submit your completed application to the Graduate Student Affairs Office, ED 115 by the deadline. Note: your advisor or program coordinator may want to see your most recent program of study before signing your application.