



# College of Community Innovation and Education

## DOCTORAL COMPREHENSIVE EXAMINATION APPLICATION

Date of Exam \_\_\_\_\_ PID \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

UCF 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 by the deadline. Note: your advisor or program coordinator may want to see your most recent program of study before signing your application.