

COMPLETION OF DOCTORAL COMPREHENSIVE EXAMS

Instructions: Print and bring form to oral examination for signatures (upon successful completion). Please drop off the signed form to Graduate Affairs, ED 115 or scan and send to <u>cciegrad@ucf.edu</u> | 407.823.5369.

 Name:________
 UCF ID (PID): _______

Program:_____ Track:_____

This student is hereby certified as having passed both the written and oral comprehensive examinations, one of the main requirements for entering Candidacy.

Signatures of Examination Committee:

	Chair	_
	Member	_
Date of written examination	<u> </u>	
Date of oral examination		
Program Coordinator / Trac		Date

For Office Use: