



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 EdGrad@ucf.edu | 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 _____

Member _____

Member _____

Member _____

Date of written examination _____

Date of oral examination _____

Program Coordinator / Track Coordinator

Date

For Office Use: