

**DEPARTMENT OF EDUCATIONAL THEORY AND PRACTICE
 Doctoral Comprehensive Exam Form**

Instructions to student: Complete the shaded portions of this form and send to Education 113.

TO: Chair, ETAP

FROM:	_____	_____
	Student Name	Student ID Number
DATE:	_____	

I am requesting that an Assessment Committee be appointed for my Doctoral Comprehensive Exam. I have completed:

	Date		Date
A minimum of 45 credits of course work	_____	Research tool exam	_____
Core courses (ETAP 710, 720, 740)	_____	Residency	_____
Advanced seminars (list: _____)			
Research courses (list: _____)			

The names of my advisor and the Assessment Committee member of my choice are listed in Part A, Appointment of Assessment Committee (type or print clearly). I request this form be forwarded to the Chair of the Assessment Committee once one has been appointed.

PART A

Appointment of Assessment Committee

 Committee Chair (appointed by ETAP Chair)

Academic Advisor

Member (selected by student)

 Chair, Educational Theory and Practice

Date: _____

Copy: Student, Advisor, File

PART B

Recommendation of Assessment Committee

(to be completed by Chair of the Assessment Committee)

The above-named student's Comprehensive Exam has been reviewed and the Assessment Committee recommends the following action:

- Pass
- Resubmit with attached recommendations for continued preparation
- Fail (after the third review)

 Committee Chair

 Academic Advisor

 Member

 Date