

**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

<b>FROM:</b>	_____	_____
	<b>Student Name</b>	<b>Student ID Number</b>
<b>DATE:</b>	_____	

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

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

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)

_____
<b>Academic Advisor</b>
_____
<b>Member (selected by student)</b>

\_\_\_\_\_  
 Chair, Educational Theory and Practice

Date: \_\_\_\_\_

**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

Copy: Student, Advisor, File