

## Ph.D. Comprehensive Exam Defense Results

To the Coordinator of Graduate Studies:

Name	CWID#
On the following date:	Upon the degree/major given below:
Degree	
Major	
Please sign below whether the student	has or has not passed the defense:
Student <u>has</u> satisfactorily completed the final defense:	Student <u>has not</u> satisfactorily completed the final defense:
Chair	Chair

**Provisions**: If the student satisfactorily completes the defense but with significant provisions attached, the committee should indicate those provisions and the conditions (including deadlines) by which the provisions are met on the back of this form.

(Must be signed and returned to the Coordinator of Graduate Studies following defense)

NOTE: At the close of the defense, after the candidate has been excused, the members of the Committee should discuss the student's defense of his/her comprehensive examination. Each member of the Committee must sign under one of the above statements recommending either a satisfactory or unsatisfactory defense.

Please also remember to complete the appropriate departmental assessment rubric(s) related to this defense; copies can be obtained from either the Coordinator or Associate Coordinator for Graduate Studies in the department, and are returned to the Associate Coordinator.