An updated copyof this form u µ • š been bmitted immediately following completion of EACH examination/requirement. College: Degreænd Program: This is to certify that the student above took the examination(s) checked below: (Signatures of appropriate chair or examiner or committee members required for all examinations.) Pass/Fail Chair Examination Date Signature Oral Comprehensivexamination † Pass † Fail ___ Thesis Prospectus Thesis Defense Examination † Pass † Fail ______ ____ ____ ResearchSkills Examination † Pass † Fail ______ _ (Specify Skill) Foreign Language Skill Examination † Pass † Fail ______ (Specify Skill) _† Pass † Fail ______

Remarks:

(Specify Requirement)

Other_

Copies: Graduate ProgramDirector CommitteeChair

VISA ~] $v \circ o \circ S \mu$ > } (qur K-1 qund J-1 Vistablders KE > z

Student