RECORD OF PhD COMPREHENSIVE EXAMINATIONS
GRADUATE PROGRAM IN RHETORIC AND WRITING

Department of: _____

Student Name: _____ **Student Number:** _____
Last **First** **Middle Initial**

1. CORE	DATE	HIGH PASS/PASS	FAIL DEADLINE TO RETAKE
a. Portfolio			
b. Take-Home Exam			
Overall			

Signed: _____ Date: _____
Chairperson of Committee

2. CONCENTRATION Field:	DATE	HIGH PASS/PASS	REVISE & RESUBMIT/FAIL DEADLINE TO REVISE/RETAKE
a. Portfolio			
b. Literature Review and Annotated Bibliography			
Overall			

Signed: _____ Date: _____
Chairperson of Committee

3. PRE-DISSERTATION	DATE	HIGH PASS/PASS	REVISE & RESUBMIT/FAIL DEADLINE TO REVISE/RETAKE
a. Prospectus Title:			
b. Oral Exam			
Overall			

Signed: _____ Date: _____
Chairperson of Committee

_____ _____
Guidance Committee Member Guidance Committee Member

_____ _____
Guidance Committee Member Guidance Committee Member

_____ _____
Director Dean of College

cc: Registrar, Dean, Department, Guidance Committee, Student