

**EAST TENNESSEE STATE UNIVERSITY
SCHOOL OF GRADUATE STUDIES**

RESULTS OF EXAMINATION, REPORT, AND/OR CULMINATING EXPERIENCE

This form is a grade and must be presented in the School of Graduate Studies by a departmental faculty or staff member.

Student Name _____ E# _____
Please type or print

Field of Study _____

Concentration _____ Degree _____

The above candidate has completed the required examination(s) as checked below: Date Held Passed Failed

	Date Held	Passed	Failed
1. Written Comprehensive Examination	_____	<input type="checkbox"/>	<input type="checkbox"/>
2. Oral Comprehensive Examination	_____	<input type="checkbox"/>	<input type="checkbox"/>
3. Master's Thesis Defense	_____	<input type="checkbox"/>	<input type="checkbox"/>
4. Doctoral Defense	_____	<input type="checkbox"/>	<input type="checkbox"/>
5. Doctoral Qualifying Examination	_____	<input type="checkbox"/>	<input type="checkbox"/>
6. Doctoral Preliminary Examination	_____	<input type="checkbox"/>	<input type="checkbox"/>
7. Report: (explain)	_____	<input type="checkbox"/>	<input type="checkbox"/>

8. Culminating Experience: (explain) _____

Signatures of Examining Committee

Chair, Advisory Committee _____

Committee Member _____

Committee Member _____

Committee Member _____

Committee Member _____

Remarks or Conditions