## Department of Teaching and Learning, Policy and Leadership Application for Graduate Comprehensive Examination

ALL EXAMS ARE BY ARRANGEMENT WITH YOUR FACULTY ADVISOR. COMPLETED APPLICATIONS SHOULD BE SUBMITTED TO YOUR ADVISOR WHEN YOU COMPLETE YOUR EXAM. YOUR ADVISOR SHOULD COMPLETE THE RESULTS SECTION AND RETURN IT TO JOY JONES IN THE TLPL OFFICE.

| Date  |               |   |           |                                    |       |     |  |
|---|---------------|---|-----------|------------------------------------|-------|-----|--|
| Name  | University II |   |           |                                    | ber   |     |  |
| Address   | Street        |   |           | City                               | State | Zip |  |
| Phone No.   |               |   | Email     |                                    |       |     |  |
| TLPL Specialization   |               |   |           |                                    |       |     |  |
| Advisor: Admit S  |               |   | emester:  |                                    |       |     |  |
| Is this a retake Exam? Yes No If yes  |               |   | If yes, # | # of previous attempts             |       |     |  |
| Please include a copy of your approved doctoral program form and your application for advancement to Candidacy. |               |   |           |                                    |       |     |  |
| TO BE COMPLETED BY THE ADVISOR: RESULTS OF EXAMINATION  |               |   |           |                                    |       |     |  |
| Date Exam Complete  | ed            |   |           |                                    |       |     |  |
| Reviewer #1   |               |   |           | Result                             |       |     |  |
| Reviewer #2   |               |   |           | Result                             |       |     |  |
| Reviewer #3   |               |   |           | Result                             |       |     |  |
| Reviewer #4   |               |   |           | Result                             |       |     |  |
| Overall Exam Resi<br>High Pass<br>Pass<br>Pass after revisio  |               | : |           | Fail<br>Pass after<br>Fail after p | •     |     |  |

ADVISOR SIGNATURE

DATE