



## REPORT ON THE FINAL EXAMINATION FOR THE DOCTORAL DEGREE

FIRST NAME \_\_\_\_\_

LAST NAME \_\_\_\_\_

STUDENT ID # (SEVEN DIGITS) \_\_\_\_\_

NETID \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

FIELD OF STUDY \_\_\_\_\_

This report must be submitted to The Graduate School whether the examination has been passed or failed. It is a required document for the audit of records for a Doctoral degree conferral. The original should be submitted to The Graduate School and a copy is to be retained by your major advisor. It must be submitted no later than the appropriate August, December, or May conferral date.

*If this report is submitted after the appropriate deadline, your degree will not be conferred until the following conferral date.*

### 1. FINAL EXAMINATION

A. Date(s) given (mm/dd/yyyy) \_\_\_\_\_

B. Faculty members participating (minimum of five, including members of advisory committee.)


PLEASE TYPE OR PRINT NAMES

### 2. RESULTS OF THE EXAMINATION

PASS

FAIL

### 3. COMMENTS

DATE: \_\_\_\_\_

### ADVISORY COMMITTEE

ADVISORS NAME PRINTED

ORIGINAL SIGNATURE (REQUIRED)

MAJOR ADVISOR \_\_\_\_\_

\_\_\_\_\_

ASSOCIATE ADVISOR \_\_\_\_\_

\_\_\_\_\_

ASSOCIATE ADVISOR \_\_\_\_\_

\_\_\_\_\_

ASSOCIATE ADVISOR \_\_\_\_\_

\_\_\_\_\_

ASSOCIATE ADVISOR \_\_\_\_\_

\_\_\_\_\_

PROGRAM DIRECTOR \_\_\_\_\_

\_\_\_\_\_

REQUIRED FOR ALL SCHOOL OF ENGINEERING AND  
INSTITUTE OF MATERIAL SCIENCE STUDENTS