Andrews University

College of Education and International Services

APPLICATION FOR COMPREHENSIVE EXAMINATION

First Name: _____   Last Name: _____

E-mail: _____   ID#: _____

Address: _____   Degree: _____

City: _____   State: ___   Zip Code: _____   Major Area: _____

Country: _____   Date: _____

NOTICE: You must apply for advancement to degree candidacy to request comprehensive examination.

Semester you wish to take the Exam _____

How many credits of work will you

1. take that semester? _____

2. have left to take <u>after</u> that semester? _____

3. need to complete with a DG's _____

Indicate how you wish to take your examination:

☐ Handwritten
  (Graduate Programs supplies paper, pens/pencils)

☐ Computer
  You must be computer literate and know Microsoft Word
  (Graduate Programs will supply the computer)

REMEMBER THIS APPLICATION CAN ONLY BE APPROVED IF YOU ARE ON REGULAR STATUS!

Student's Initials _____   Date _____

DEPARTMENTAL APPROVAL

_____   Date _____
Major Advisor

_____   Date _____
Department Chair

FINAL CLEARANCE AND APPROVAL

Candidacy form submitted ☐   Checked ☐   Cr left after Exam _____

Graduate Records Officer: _____   _____
                                                          Date

_____   _____
Dean, College of Education & International Services   Date