

APPLICATION FORM FOR THE PH.D. COMPREHENSIVE EXAM (GROUP II)

Name of Applicant: \_\_\_\_\_

Date and Time of Exam: \_\_\_\_\_ (Must be within one month of passing Group I exam)

My Group II field is: \_\_\_\_\_

My Group II committee is: \_\_\_\_\_  
\_\_\_\_\_

My Group I field: \_\_\_\_\_ Group I exam date(s): \_\_\_\_\_

Results: \_\_\_\_\_ Attempts: \_\_\_\_\_

My Group III field: \_\_\_\_\_ Group III exam date(s): \_\_\_\_\_

Results: \_\_\_\_\_ Attempts: \_\_\_\_\_

I have met all the pre-requisites for the Group II exam.

Signatures required:

\_\_\_\_\_  
Student Date

\_\_\_\_\_  
Major Professor Date

\_\_\_\_\_  
Dir. Of Graduate Studies Date

**Copy to Student and the original in the Student's file.**