



THE GRADUATE SCHOOL
CLEMSON UNIVERSITY

**GS5D - RESULTS OF THE DOCTORAL COMPREHENSIVE
EXAM AND CANDIDACY FORM**

*Date _____

TO THE DEAN OF THE GRADUATE SCHOOL:

This committee has given _____
(Student's Name)

_____ the comprehensive examination for the Doctor of Philosophy/Education
(Student CU ID Number)

degree with a major in _____, and reports the results as follows:
(Major)

Passed; student is admitted to candidacy.*

Failed

The examination was given over the dates _____ to _____

If the result is "Failed", please indicate recommendation relative to a second comprehensive examination, if any.

Examining Committee

Printed name

Signature

Chairperson

Chairperson

Return this form to Graduate Enrolled Services, 104D Sikes Hall.

**Student has five years from passage of the comprehensive examination to complete all requirements for the doctorate degree.*

