



Completion of the Graduate Program Comprehensive Exam Process

SECTION I: STUDENT INFORMATION

Student Name	TUId	Email
Current Mailing Address		Home Telephone
Student Signature	Projected Graduation Date	Year entered the program

SECTION II: DETAILS

Dates of administration of the comprehensive exam: _____

- Attach: Written Comprehensive Exam Responses
 Committee Comments or Recommendations

SECTION III: CERTIFICATION OF COMPLETION BY THE COMMITTEE

This Student has successfully completed the Comprehensive Exam process.

Name of Committee Chair	Email address
Signature of Committee Chair	Date

Name of Committee Member	Email address
Signature of Committee Member	Date

Name of Committee Member	Email address
Signature of Committee Member	Date

Submit two copies of this form, with two sets of attachments to: 1) the current FMA Graduate Program Chair, and to 2) Denise Lannon in the SCT Graduate Office. Also submit an electronic version of the completed questions to Prof. Joanna Bouldin for inclusion in the Film and Media Arts Department Archive.