

Report on the Pre-Candidacy Exam

Student Name: _____ Exam Date: _____

Student UM ID _____ Email _____

Program Name _____

Results of the exam: **Pass** **Pass with additional requirements *** **Fail**

*Additional requirements: _____

- Note: When conditions are met, the Chair should make confirmation in writing, with a copy to the student and the PhD Program Director.

Deadline for meeting conditions: _____ Will another exam be necessary? ___NO ___YES

Committee Members' Signatures	Print Name	UMID (required)
Chair:		
Cognate Member:		

Additional Comments and Recommendations

You can find additional information about the Pre-Candidacy Exam format and expectations in the [SEAS PhD Handbook](#).