Student ID	Number:	
Student ID	runnoci.	

Graduate Program in Biology

$MS\ Comprehensive\ Examination\ \underline{RESULTS}\ Form$

EXAM DATE(S):		
EXAMINATION RESULT Pass Fail 0	Option to retake (one time only)	
	option to retake (one time only)	
Name of Research Advisor (Print)	Signature of Research Advisor	Date
Test administered by:		
Name (Print)	Signature	Date
MS Advisory Committee's suggested cou	rse of action to rectify any perceived deficiency:	
Name of Student (Print)	Signature of Student	Date
Name of Program Director (Print)	Signature of Program Director	Date

Note to Committee: It is a program requirement that ten calendar weeks must pass before a retake of the comprehensive examination may be scheduled. If a student fails to pass this exam, the student may be re-assigned to the practicum track or may no longer be in good standing with the program and may lose graduate student status at the discretion of the Advisory Committee. The results of this examination should be submitted to the Biology office prior to the end of the student's third semester in residence.

This form should be sent to the Registrar's Office for permanent recordkeeping.