



SCHOOL OF PUBLIC HEALTH

Department of Epidemiology and Biostatistics
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Department of Epidemiology and Biostatistics
Doctor of Philosophy
Comprehensive Examination Report (M2)

Instructions:

- 1. Names of committee members must be typed by student prior to Oral Comprehensive Examination.
2. Advisor returns completed form to Graduate Director once signatures and votes are obtained from each committee member
3. Students are encouraged to submit the application for Advancement to Candidacy (M3) once this form (M2) has been submitted.

Student's Name: _____

Area of Specialization: _____

Major Advisor: _____

Dates of Written Examinations: _____

Date of Oral Examination: _____

Comprehensive Examination Committee Members:

Table with 4 columns: Type Name, Signature, Vote for Pass (Circle), Vote for Not Pass (Circle). Rows 1-6.

Advisor (Print Name and Sign)

Date

Graduate Director (Signature)

Date