



# MASTER'S COMPREHENSIVE EXAM VERIFICATION

Today's Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_

Department: \_\_\_\_\_ Student ID# \_\_\_\_\_

Date of Comprehensive Exam: \_\_\_\_\_

I verify that the above named student has successfully passed the  
**Master's Comprehensive Exam.**

Department Graduate Director: \_\_\_\_\_

Graduate School Coordinator's Initials: \_\_\_\_\_