

***Second Examination  
Doctor of Philosophy Degree***

Name of Student:

Graduate Program:

Time, Date and Place of Examination:

Type of Examination:            written            oral            combination

Results of Examination:            Pass            Not Pass

Remarks:

Typed Names and Signatures of Faculty Administering this Examination

Name	Signature	Date
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Major Advisor

Graduate Program Director

Department Chair (or Dean for Graduate Programs and Research in Nursing)

Dean, School of Graduate Studies

***A copy of the examination questions is filed in the office of the School of Graduate Studies. The answers are kept in the departmental files.***