

## Report on Qualifying Examination

name	of student (please print)		date of exam
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esult			
	☐ Pass	☐ Conditional Pass	☐ Fail
omments (including	an explanation and recommen	dation if the exam was passed wit	th condition or failed):
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tudent has been info	rmed of the above decision.		
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Minor Examiner:	name (please print)		
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Minor Examiner:			
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Faculty member willi	ng to serve as Thesis Advisor:	signature	
		signature	
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raduate Chair Appr	3 T W.		