## CARL H. LINDNER COLLEGE OF BUSINESS UNIVERSITY OF CINCINNATI REQUEST FOR PH.D. COMPREHENSIVE EXAMINATIONS AND ADMISSION TO CANDIDACY

NAME:		
MAJOR DEPARTMENT:		
ADDRESS:	NE (Home): FAX:	
PHONE (Home):	(Office):	FAX:
E-MAIL:		
I understand that in reques	ting to take my written comp	orehensive examination:
2. All "I" and "N" grades (the beginning of the semes	ster in which the examination omprehensive examinations r	research) must be removed by a is to be taken.
	comprehensive examination: Spring Summer	* Year:
	e clear understanding that the	r written comprehensive in the examination may not be graded
	EHENSIVE EXAMINATION Written and oral examination	<b>ON</b> (to be filed with Graduate ns have been completed).
PASS		
FAIL:	Adviser Coordina	ator
Date:		
	Ph.D. Departmen	tal Coordinator