

Report of Qualifying Exam/Dissertation Proposal

Department of Neurobiology and Anatomy

Student: _____ Lab: _____

Date of examination: _____

Pass

Conditional Pass
(Specify conditions in box)

Fail

Comments: Describe plans to complete coursework. Specify work required to complete the exam. Note any other factors impacting the program of study. Use additional pages or back if necessary.

Member (Chair)	Department	Signature

Advisor signature: _____ Date: _____

Student signature: _____ Date: _____

Entered in Graduate Student Degree Tracking by: _____ Date: _____
(Initial – Acad Admin or DGS)