

# D | A | A | P

College of  
**DESIGN**  
**ARCHITECTURE**  
**ART**  
**PLANNING**

## COMPREHENSIVE EXAMINATION

A copy of this form must be retained in the student's file.

## STUDENT INFORMATION

Student Name: \_\_\_\_\_ ° \_\_\_\_\_

Date Entering the PhD Program: \_\_\_\_\_

\_\_\_\_\_  
Student Signature Date

## PRELIMINARY REQUIREMENTS

Number of PhD Colloquium absences: \_\_\_\_\_ GPA: \_\_\_\_\_ (attach transcripts)

**Date of Comprehensive Examination:** \_\_\_\_\_  
(before September 16th in 5th semester of study)

## Student Request

Postpone the examination to a later date to be determined

## EXAMINATION RESULTS

Major: ( ) Pass ( ) Fail Date: \_\_\_\_\_

Minor: ( ) Pass ( ) Fail Date: \_\_\_\_\_

Methodology: ( ) Pass ( ) Fail Date: \_\_\_\_\_

\_\_\_\_\_  
Chairperson Signature 6SFW

\_\_\_\_\_  
Committee Member (Minor) Signature Date

\_\_\_\_\_  
Committee Member (Methodology or at-large) Signature Date

\_\_\_\_\_  
PhD Program Director Signature Date

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