

Florida International University
School of Computing and Information Sciences
PhD Qualifying Exam, Report of Exam

Note: The Exam Committee should fill out this form as a whole. The form needs to be submitted to the Graduate Program Advisor as soon as the exam has ended.

Student Name: _____ Panther ID _____

Current Term: _____

Major Professor: _____

Exam Committee Members: _____

Date of Oral Exam: _____ Time: _____ Location: _____

Date of Written Exam (if taken): _____ Time: _____ Location: _____

Results (check one and only box):

- Pass
- Conditional Pass

Conditions: _____

- Fail/Inconclusive

Notes: _____

Signatures

Exam Committee Chair: _____

Committee Member: _____

Committee Member: _____