

**Computer Science Department
Ph.D. Research Qualifying Exam
Results Report**

Student name: _____

Date of exam: _____

What did student do to fulfill the exam requirement? (e.g. names of courses taken, topic of paper written, etc.)

Exam Result: _____ Pass

_____ Fail

Signatures of preliminary committee members (at least three are required)

Signature

Printed Name

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____