

Appointment of Comprehensive/Threshold Examination Committee [D1]

This form is first used to appoint a committee for the comprehensive or threshold examinations for students in a doctoral degree program. Part A must be approved before the examinations take place. Part B reports the results of the examinations. The committee should be composed of three members. Incomplete forms or those submitted without a CV for the outside member will be rejected. All materials should be submitted by e-mail to GradSchoolForms@umsl.edu. After Graduate School approval, the form will be returned via UMSL email to the student, committee chairperson and Graduate Program Director.

At a minimum, the committee should meet these requirements for your degree program:

- 3 graduate faculty members OR 2 graduate faculty members, in addition to 1 recognized scholar from outside the university
 - Current graduate faculty listing - <http://umsl.edu/go/GradFacultyList>
 - 1 recognized scholar from outside the university may serve as an outside member upon approval of the graduate dean. In this case, the committee would be composed of 2 graduate faculty members and the outside member.
- All committees are limited to one outside committee member
- A current CV [in pdf format] of the recognized scholar must accompany the submission of this form.

Part A – Committee Appointment – [must be approved prior to Part B]

Name: _____ Student #: _____
Please use electronic signature – if signing by hand, signature must be legible and names should be printed.

Degree Program: _____

Student Signature and Date

Proposed Committee:

Committee Chairperson Signature

Committee Member

Committee Member

Committee Member

Graduate Program Director Signature and Date

Graduate School Approval – Dean Spilling or Associate Dean Harris

Part B – Committee Report Results [all sections must be completed, after approval of Part A]

When the comprehensive exams have been completed, the committee will resubmit Part B, by e-mail, with the report of the committee.

Date: _____ Committee Vote: _____ For _____ Against _____
Vote should indicate # of members For & Against
Please use electronic signatures – if signing by hand, signatures must be legible and names should be printed.

Recommendation: Pass Fail

Committee Chairperson Signature

Committee Member Signature

Committee Member Signature

Committee Member Signature

Graduate Program Director Signature and Date

Graduate School Approval – Dean Spilling or Associate Dean Harris