

Comprehensive examination application

Date: _____ Eagle ID: _____

Name: _____

Address: _____

Telephone Number: _____

E-Mail address we should send Exam to: _____

Alternate/Backup E-mail address: _____

Fax Number (if applicable): _____

Where will you be taking the exam?:

On Campus

Off Campus

What type of computer will you use:

Macintosh

IBM

Preferred Computer Software:

Student Request for Comprehensive Exam Committee Members:

Chairperson: _____

Written _____