Preliminary Re-Examination Registration Form

Please Return This Form to The Graduate School Office (Annenberg 5-206).
Att: Chrissie Kong

Box 1257

Please type

DETAILED INSTRUCTIONS FOR THE PRELIMINARY EXAMINATION CAN BE FOUND IN THE GRADUATE SCHOOL STUDENT HANDBOOK

Student

Preceptor                             Training Area

Examination Date & Time                Location

Date of Previous Preliminary Examination:

EXAMINATION COMMITTEE MEMBERS Please follow the instructions in the Graduate School Student Handbook.

1. Chairperson/MTA Dir.

2. 

3. 

4. 

Should there be an outside person, please provide the address below.

This form MUST be returned to the Graduate School Office AT LEAST FOUR WEEKS PRIOR to the Exam. We reserve the right to reschedule an Exam if not given proper notification.

Student's Signature            Date

Preceptor's Signature            Date

MTA Director's Signature            Date

Grad School use only:

Annc:  Vote:  

Rev. 8/09