

Report on Doctoral Qualifying Examination-Professional

Office of Graduate Enrollment Services, The Pennsylvania State University, 114 Kern Building, University Park, PA 16802-3396; (814) 865-1795; (814) 863-4627(fax)

This is to certify that a group of graduate faculty members have administered a doctoral qualifying examination and evaluation to:

Last Name	First Name	Middle Initial	Penn State 9-digit ID
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Student's current local mailing address (not program's address)

Degree sought	Major field	Dual- title field (if applicable)	Date of evaluation
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Qualifying Examination:

Was this the first attempt at Qualifying Examination? yes no

Please check the appropriate boxes below:

PASSED:

The student passed the Qualifying Examination (for students in dual-title programs, checking this box indicates the student has passed qualifying for both the major and dual-title fields) and should now be considered an official doctoral student.

FAILED:

The student failed the Qualifying Examination but will be given the opportunity to retake it. A copy of the letter to the student to this effect is attached.

The student failed the Qualifying Examination and will **NOT** be given the opportunity to retake it. The program has rejected the student from the program. A copy of the letter to the student to this effect is attached.

If the student failed the Qualifying Examination, and will **NOT** be given the opportunity to retake it, indicate whether the following statement should appear on the transcript:

Failed Qualifying Examination – dropped from program yes no

Initial Assessment of English Competence

Competent

Requires improvement (indicate remediation plan below)

Remediation Plan

Signature of Graduate Program Head or Director of Graduate Student Services for Major Program	Printed Name	Date
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Signature of Graduate Faculty Dual -Title Representative (If applicable)	Printed Name	Date
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