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| **Student Info** |
| Student’s Name: |  | Exam Date/Time: |  |
| Mentor: |  |
|  | (Name) | (Title) | (Department) |
| Proposal Topic: |  |
|  |
|  |
| **Examination Results** |
| **Written Proposal** | **Oral Defense** | **Rigor & Reproducibility (R&R)** |
|  [ ]  High Pass |  [ ]  High Pass | [ ] Check this box to certify that R&R relating to the student’s proposal was discussed. |
|  [ ]  Pass |  [ ]  Pass |
|  [ ]  Conditional Pass |  [ ]  Conditional Pass |
|  [ ]  Fail |  [ ]  Fail |
| **Comments are required:** |
| R&R Comments: |  |  |
|  |
| Overall Comments: |  |  |
|  |
|  |
| **Examiners** |
|  | Name, Department | Signature |
| 1. Grad Comm – **Exam Chair** |  |  |
| 2. Grad Comm – **R&R Rep** |  |  |
| 3. PSTG Mentor |  |  |
| 4. PSTG Mentor |  |  |
| 5. PSTG Mentor |  |  |
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| This Candidacy Examination Committee read and evaluated the student’s *Written Proposal* and subsequently provided the student with an *Oral Examination* of that proposal. We agree on the grade(s) assigned and comments above. |
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