

## **Report on Research Qualifying Examination**

This form is required for all CS PhD students and due to the department office after RQE is complete.

Student Information:		
Name:	M#	
Advisor name (s):		<u> </u>
Examination Results (advisor will c	heck Pass or Failure)	
Pass: The examining comm		owledge and understanding satisfactory. No
1 1 · · · · · · · · · · · · · · · · · ·	-	e examining committee found the student's endation detailed in comments below.
Committee Approval Signatures		
Print committee names (including a members.	dvisors) in the "Printed Name	e" column. Attach a second sheet to add more
Check appropriate box	Signature	Printed Name
Pass Fall		
For failure results, provide commen conditions that were given to the s		e oral examination (Please attach any written
Please provide comments on chang	·	
(Please attach any written conditio	ns that were given to the stu	ident).
Have graduate assessment forms (G	GLOs) been completed for the	candidate?
Conducts Day on Division 2		G
Graduate Program Director or Chai	r	Date:
Record in Banner:		