

**Sociology Doctoral Program
Comprehensive Exam Committee Form**

Student Name

E-mail

Areas of Specialization

Written Exam Date

Oral Exam Date

Committee Member Names
Names of members need to be printed and signed.

Chair

Member

Member

Member

Member

Member

This form must be submitted to the department at the time you let the DGS know when you will sit for the exam. (See handbook for additional details)

Date Submitted

Staff Signature