

# G301A

Office of Academic Affairs  
Graduate College  
Illinois Institute of Technology  
110 Main Building  
Chicago, IL 60616

## Ph.D. Comprehensive Exam Committee and Exam Scheduling

Please type or print. Only one original is required.

1. Student must arrange the committee with his/her academic advisor by the third week of classes.
2. The form with committee member names and exam date must be submitted to the Office of Academic Affairs no later than two weeks prior to the exam date.
3. Approved copies will be mailed to all parties by the Office of Academic Affairs.
4. Exam results (Form 309) are due to the Office of Academic Affairs within 72 hours of the exam time/date. Exam results must be submitted to the Office of Academic Affairs by the academic advisor on Exam Results Form 309.
5. Exam results must be received by the Office of Academic Affairs no later than one week prior to the last day of classes/lectures.

I have personally contacted each member of the committee who has agreed to serve at the time and place indicated; this will be the first or second time (circle one) I am taking the examination.

\_\_\_\_\_  
Student's Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Email

\_\_\_\_\_  
Student ID/CWID

\_\_\_\_\_  
Major

**I recommend that the following committee be appointed by the Dean of the Graduate College:**

Department Chairman Signature \_\_\_\_\_

Date \_\_\_\_\_

Committee Names (print or type) \_\_\_\_\_

Department or Address \_\_\_\_\_

Committee Chairman \_\_\_\_\_

Outside Member (from IIT, mandatory) \_\_\_\_\_

External Member (non-IIT, optional) \_\_\_\_\_

*Exam must be conducted in sufficient time to meet all deadlines as stated above.*

**Ph.D. Comprehensive  
Examination Schedule**

Date \_\_\_\_\_

Time \_\_\_\_\_

Room - Building \_\_\_\_\_

**The above named committee is hereby appointed by the Dean of the Graduate College to conduct the above examination(s) at the assigned time(s):**

Dean of Graduate College Signature \_\_\_\_\_

Date \_\_\_\_\_