SECTION A

Name _________________________________________________________

Last__________________________ First__________________________ Bear Number________________________

Local Address ________________________________________________________________________________

Semester/Date of Exam ______________ Student Signature ___________________________________________ Date ____________

I request permission to take the comprehensive examination. If I do not take the exam during the semester indicated above, then I agree to apply with a new permit for the semester in which I will take the examination.

SECTION B, C, & D ARE COMPLETED BY ADVISOR

SECTION B  (For Office Use Only)
GUIDELINES FOR ISSUING A MASTER’S COMPREHENSIVE PERMIT

1. ______ Plan of study on file in the Graduate School.
2. ______ 30 completed semester hours
3. ______ Must have grade point average of at least 3.00.

______ Eligible ______ Ineligible

Initial ______________ Date ______________

SECTION C

The student must have approval of the program coordinator to take the written comprehensive examination.

Print name of Program Advisor ___________________________ Signature of Program Advisor(s) ___________________________ Date ___________________________

SECTION D

The records of the above named student have been checked. The student is in good standing in his/her degree program and is hereby authorized to take the written comprehensive examination. This permit and results of the written comprehensive examination must be returned to the Graduate School by ______________________ for students to schedule the oral examination.

To the Program Advisor: If you do not give the exam to this student this semester, the student must apply for a new permit for the semester in which he/she takes the examination.

PLEASE CIRCLE ONE:

Passed  Failed  Did Not Take

Signature of Program Advisor ___________________________ Date ___________________________
MASTER'S WRITTEN COMPREHENSIVE REQUEST FORM

Directions:

1. Fill out sections A of the PROGRAM APPROVAL FORM.

2. Obtain your advisor's signature in section B verifying that you have completed or are currently enrolled in all courses required for eligibility to take the comprehensive examination. All requirements for eligibility must be listed on the attached Program Approval Form.

3. Return the form with Sections A, B, & C completed to HESAL Office Administrative Assistant. Actual examination dates are set by the HESAL faculty. You must have the completed form returned to the HESAL Office at least three weeks in advance of the actual test date.

YOUR REQUEST MUST HAVE THE APPROVAL OF THE ADVISOR BEFORE YOU TAKE THE WRITTEN COMPREHENSIVE.