

**UNIVERSITY OF TENNESSEE AT CHATTANOOGA
GRADUATE DEGREE EXAMINATION RESULTS**

Name: _____ Student ID: _____

Major: _____ Degree: Master's Non-Thesis
 Master's Thesis
 Doctoral

Examination date(s): _____

Check only those that apply:

<input type="checkbox"/> Qualifying/Comprehensive Assessment	Oral: Pass: <input type="checkbox"/>	Written: Pass: <input type="checkbox"/>
	Fail: <input type="checkbox"/>	Fail: <input type="checkbox"/>
	Not Applicable: <input type="checkbox"/>	Not Applicable: <input type="checkbox"/>

<input type="checkbox"/> Preliminary Exam:	Oral: Pass: <input type="checkbox"/>	Written: Pass: <input type="checkbox"/>
	Fail: <input type="checkbox"/>	Fail: <input type="checkbox"/>
	Not Applicable: <input type="checkbox"/>	Not Applicable: <input type="checkbox"/>

<input type="checkbox"/> Final Thesis/Dissertation Defense:	Pass: <input type="checkbox"/>
	Fail: <input type="checkbox"/>

Comments: _____

Signatures are required only where applicable.

	Typed Name	Signature
Chairperson / Advisor	_____	_____
Co-Chair	_____	_____
Committee Member	_____	_____
Committee Member	_____	_____
Committee Member	_____	_____
Program Official (Director or Coordinator)	_____	_____