

DEPARTMENT OF  
**COMMUNICATION**



College of Arts  
& Sciences

**COMPREHENSIVE EXAMS COMMITTEE – M.A. PROGRAM**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

The following members of the faculty will serve as my Comprehensive Exam Committee (indicate with an X who will serve as the committee chair):

	<u>NAME</u>	<u>SIGNATURE</u>	<u>DATE</u>	<u>CHAIR</u>
<b>Theory</b>	_____	_____	_____	_____
<b>Methods</b>	_____	_____	_____	_____
<b>Specialization</b>	_____	_____	_____	_____

AGREED:

\_\_\_\_\_

GRADUATE STUDENT

\_\_\_\_\_

DATE

AGREED:

\_\_\_\_\_

GRADUATE DIRECTOR

\_\_\_\_\_

DATE