



**Indicate which question is to be the Overarching Question:**

Curriculum and Instruction

Focus Area

Research

**Sit Down Test Scheduling**

Date: \_\_\_\_\_

Room Reserved: \_\_\_\_\_

Signed by COE Room Scheduler

Computer Reserved: \_\_\_\_\_

Signed by T&L Administrative Assistant

Comprehensive Exam Committee Chair available to supervise student's sit down exam as scheduled:

\_\_\_\_\_

Signed by Committee Chair

**Oral Defense Scheduling (may change as needed)**

Date: \_\_\_\_\_

Room Reserved: \_\_\_\_\_

Signed by COE Rm. Scheduler

This schedule is agreed to by:

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Comprehensive Exam

Committee Chair/s: \_\_\_\_\_ Date: \_\_\_\_\_

C & I Coordinator: \_\_\_\_\_ Date: \_\_\_\_\_

CC: Comprehensive exam Committee Chair  
C & I Coordinator  
Student File (T&L Admin. Assist.)