College of
Liberal Arts and Sciences
VILLANOVA
UNIVERSITY

GRADUATE STUDIES

## APPLICATION FOR COMPREHENSIVE EXAMINATION

This form should be completed by the student, Chairperson and Program Director and forwarded to the Graduate Studies Office by the deadline date posted in both the Graduate Studies Catalog and on-line Academic Calendar. You should also consult with your Program Director for any additional information you may need regarding the comprehensive examinations in your specific program.

Student ID _____

**Please print or type.**

Name _____
First Middle Last

Address _____

I am prepared to take the comprehensive examination

_____ oral _____ written _____ essay

Field _____

Date _____

Time _____

Building _____

Room _____

*G.P.A. _____ Is this a re-examination? Please Select _____

Semester Hours (including current registration) _____

Student's Signature _____ Date _____

Chairperson's Signature _____ Date _____

Program Director's Signature _____ Date _____

***You must have a minimum GPA of 3.00 to be eligible to sit for the Comprehensive Examination.***