

Student Records Office



Qualifying Examination Evaluation

Student's Personal Information	
Matriculation N°	
Family Name	
First Name	
Major	
Academic Advisor	

Evaluation of the Qualifying Examination	
The outcome of the above-named student's qualifying examination is:	
<input type="checkbox"/>	Pass
<input type="checkbox"/>	Fail

Examiners' Signatures		
We hereby submit the outcome of the Qualifying Examination for the above-named student. We have also enclosed a detailed written assessment of the examination.		
Date	1 st Examiner's Name	Signature
Date	2 nd Examiner's Name	Signature
Date	3 rd Examiner's Name	Signature

Elected Dean's Signature	
Date	Signature