



Comprehensive Examination Ballot

Written Examination Date: _____

Oral Examination Date: _____

Student Name: _____ UH ID: _____

Student Email: _____

Student's Major Area: _____

To be completed after the Oral exam

_____	_____	_____	_____
Chair Professor	Date	Pass	Fail
_____	_____	_____	_____
Committee Member	Date	Pass	Fail
_____	_____	_____	_____
Committee Member	Date	Pass	Fail
_____	_____	_____	_____
External Committee Member	Date	Pass	Fail

Recommendation: