SOUTHEASTERN LOUISIANA UNIVERSITY
GRADUATE DEGREE EXAMINATION RESULTS

Name: _____ W#: _____

Major: _____ Degree: ○ Masters Non-Thesis
○ Masters Thesis
○ Doctoral

Examination Date(s): _____

Check only those that apply:

☐ **Comprehensive:** Oral: Pass: ☐ Fail: ☐ Written: Pass: ☐ Fail: ☐

☐ **Qualifying or Preliminary Exam:** Pass: ☐ Fail: ☐

☐ **Final Defense:** Pass: ☐ Fail: ☐

Comments: _____
_____
_____

Committee member signatures are required only where applicable.

	Typed Name	Signatures
Major Professor or Director:	_____	_____
Committee Member	_____	_____
Committee Member	_____	_____
Committee Member	_____	_____
Committee Member	_____	_____
Graduate Coordinator:	_____	_____

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