

Lamar University
Department of Deaf Studies and Deaf Education
Doctoral Program in Deaf Education (Ed.D.)
Results of the Preliminary Exam

Date of Examination: _____

Candidate's Name: _____ LU#: _____

Recommendations Made by Doctoral Committee Following Qualifying Examination (e.g., pass, fail, rewrite specific sections, take additional courses):

Signatures/Approvals:

| <u>Committee</u> | <u>Printed Name/Signature</u> | <u>Approved</u> | <u>Not Approved</u> |
|------------------|-------------------------------|--------------------------|--------------------------|
| Doctoral Advisor | _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Committee Member | _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Committee Member | _____ _____ | <input type="checkbox"/> | <input type="checkbox"/> |

Department Chair Date: _____

Dean /Fine Arts and Communication Date: _____

Dean of Graduate Studies Date: _____