

BRIGHAM YOUNG UNIVERSITY  
DEPARTMENT OF PLANT AND WILDLIFE SCIENCES

**Doctoral Comprehensive Examination Evaluation**

Student: \_\_\_\_\_ Date of Examination: \_\_\_\_\_

I certify that the above-named student has performed in the following category in this examination: (Specify 1, 2, 3, or 4. Decimals may be used, e.g., 3.5.)

<u>Pass</u>		<u>Pass with Qualifications</u>	<u>Fail</u>	
5. Outstanding	4. Adequate	3. Retake a Portion	2. Marginal	1. Poor

I note the following strengths and weaknesses: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Senior Committee Member (sign here)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Please print name)

Final approval that all qualifications have been completed.

\_\_\_\_\_  
Senior Committee Member (sign here)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Graduate Coordinator (sign here)

\_\_\_\_\_  
Date