## 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>		Pass with Qualifications	Fail	
5. Outstanding	4. Adequate	3. Retake a Portion	2. Marginal 1. Poo	r

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

Committee Member (sign here)

Date

(please print name)