



THE FLORIDA STATE UNIVERSITY

COLLEGE OF EDUCATION

Office of Academic Services and Intern Support

SPECIALIST'S COMPREHENSIVE EXAM/PORTFOLIO DEFENSE

RESULTS Directions:

- Please print or type
- Submit one original to OASIS
- Submit one copy to student's department
- Student should retain one copy for his/her personal records

TYPE:

- Specialists's Comprehensive Exam
- Specialists's Portfolio Defense

Student Name

EMPLID

Department

Major

Major Professor — printed name & signature

Exam Date: ___/___/___

Current Date: ___/___/___

FORMAT:

- Written Oral

RESULTS:

- Passed Failed Conditional

Consenting Members:

printed name & signature

printed name & signature

printed name & signature

Dissenting Members:

printed name & signature

printed name & signature

Conditions (if any): _____

Recommended graduation date: _____ 20____
semester