



# SCHOOL OF ENGINEERING

Surname: \_\_\_\_\_  
 Given Name: \_\_\_\_\_  
 Student Number: \_\_\_\_\_

## QUALIFYING EXAMINATION REQUEST FORM

The undersigned, as members of the Advisory Committee for the above-named candidate, certify that the student is sufficiently prepared to take the Qualifying Examination, both written and oral. Successful completion of both parts will qualify the student as candidate for the Ph.D. degree.

Attached is an evaluation of the student's performance in the required courses and the student's potential as a researcher.

READY                      NOT READY

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

*If the advisory committee deems the student is not ready to proceed with this examination, please provide supporting documentation.*

\_\_\_\_\_  
 Student's signature

\_\_\_\_\_  
 Date

\*\*\*\*\*

Endorsed by:

\_\_\_\_\_  
 Graduate Co-ordinator

\_\_\_\_\_  
 Date