UNIVERSITY OF NOTRE DAME | BIOENGINEERING GRADUATE PROGRAM

Oral Candidacy Exam Report

Student: Please complete this form and provide it to your committee for grading and signatures at your Oral Exam.
PLEASE NOTE: Your Written CE Report must be graded as "Pass" before beginning your Oral Exam.

Name/NDID:_____ CE Exam Date: _____

Advisor: _____ Co-Advisor: _____

Committee Member and Department: _____

Committee Member and Department: _____

Committee Member and Department: _____

Committee Member and Department: _____

Committee Member and Department: _____

Committee Members: Please grade the student's oral exam and indicate pass or fail. Two of the three committee members must indicate scores in the passing range in order for the student to pass the oral component of the Candidacy Exam.

Committee Member Signature	Excellent	Very Good	Good		Pass	Fail

Program Director: Pinar Zorlutuna

Director Signature: _____ Date: _____