



DEPARTMENT OF PSYCHOLOGY

Results of General Comprehensive Paper

Candidate: _____

Last four of SSN: _____

Date: _____

Title: _____

(ACTION SIGNATURES)

| | | | P | NP |
|------------|-----------|--------------|----------|-----------|
| Examiner 1 | _____ | _____ | — | — |
| | Signature | Printed Name | | |
| Examiner 2 | _____ | _____ | — | — |
| | Signature | Printed Name | | |
| Examiner 3 | _____ | _____ | — | — |
| | Signature | Printed Name | | |
| Examiner 4 | _____ | _____ | — | — |
| | Signature | Printed Name | | |

Graduate Program Director

Department Chairman