

UNIVERSITY OF TOLEDO DEPARTMENT OF CHEMISTRY

Report of Qualifying Examination
ORAL EXAMINATION

TO: _____, Director of Graduate Studies

FROM: _____
Chair, Oral Examination Committee

CC: _____, Research Advisor

This memo is to inform you that _____
(Name)

underwent his/her Qualifying Examination on _____(date) at which time he/she defended
his/her proposal before this committee.

The results of the examination:

- Passed
- A retest is required
- Failed

Signatures of Examining Body:

Return this form and a summary report (in the case of a retest or failure) to the Director of Graduate Studies
within three days after the examination.

Revised 6/12