

**UNIVERSITY OF TOLEDO**  
**DEPARTMENT OF CHEMISTRY AND BIOCHEMISTRY**

*Report of Qualifying Examination*  
DISSERTATION RESEARCH PROPOSAL  
AND ORAL EXAMINATION

TO: \_\_\_\_\_, Director of Graduate Examinations

FROM: \_\_\_\_\_  
Chair, Non-Dissertation Research Proposal Examinations Committee

CC: \_\_\_\_\_, Research Advisor  
\_\_\_\_\_, Director of Graduate Studies

This memo is to inform you \_\_\_\_\_  
(Name and ID number)

underwent his/her Non-Dissertation Research Proposal Examination on  
\_\_\_\_\_ (date) at which time he/she defended his/her independent research  
proposal before this committee. The results of the examination:

- Passed
- A retest is required
- Failed

Signature of Examining Body:

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

Return this form and a summary report to the Director of Graduate Examinations within two days after the scheduled date.

Revised 5/15