Student Comprehensive Exam Evaluation Form

Student Name:	Date:	
Evaluator 1 Average Score: Comments:		
Evaluator 2 Average Score: Comments:		
Evaluator 3 Average Score: Comments:		
Evaluator 4 Average Score: Comments:		
 Overall Exam Average: 0 -12= Limited Proficiency / Fail 13-14 = Some Proficiency / Qualified Pass 15-17= Proficiency / Pass 18-20 = High Proficiency / Pass with Honors 		
Committee Decision:		
Director:		
Comments:		
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