

Pre-Preliminary Examination Information

Please file this form with the DGS office at least one
week before the Preliminary Exam

(This is a fillable PDF: Click inside the boxes to add text to each field)

Your Name

The time and place of your preliminary exam:

Date

Time

Building/Room Number

The committee that will administer the exam:

Chair

Committee member

Committee member

Committee member

Committee member

Today's date