

DEPARTMENT OF EPIDEMIOLOGY AND ENVIRONMENTAL HEALTH

PhD Preliminary Examination Permission Form

This form documents that the student has obtained the required permission from their Primary Faculty Mentor and the Director of Graduate Studies-PhD to sit for the General/Analytic Preliminary Examination.

Student Information

Name:

Person #:

Program:

Preliminary Exam Year:

Signatures

Student

I confirm that I have reviewed the preliminary exam requirements outlined in the *EEH Graduate Student Handbook* and am prepared to sit for the exam. I have discussed exam timing with my Primary Faculty Mentor.

X _____ **Date:** _____

Primary Faculty Mentor

I confirm that the student has permission to sit for the preliminary examination during the year noted above.

X _____ **Date:** _____

Director of Graduate Studies-PhD

I confirm that the student has permission to sit for the preliminary examination during the year noted above.

X _____ **Date:** _____