

Department of Electrical and Computer Engineering



GPP7 – PhD Preliminary Examination Report Form

Form: GPP7 (revised on September 26, 2020)

The Preliminary Examination is the final requirement for doctoral candidacy. This exam is taken over a five-week period. It must be successfully completed by the student's **fourth semester** (for the BS-to-PhD track), or **third semester** (for all the other tracks). The student is allowed to retake the exam only once. In the semester the student intends to take the Preliminary Examination, he/she needs to register for the 0-credit hour EEL 8964 (Prelim Exam). The examination committee should contain **at least three faculties with GFS status from the ECE Department**.

STUDENT INFORMATION

1. First name: _____ 2. Last name: _____
 3. University: FAMU FSU 4. Student I.D. or FSU#: _____

SUCCESSFUL ACCOMPLISHMENT SIGNATURES

We certify that the student has successfully passed the Preliminary Examination on _____ (Date)

	(please print)	(please sign)	
Chair (Adviser):	_____	_____	(please check one) PASS FAIL
Co-Chair (optional):	_____	_____	PASS FAIL
Member:	_____	_____	PASS FAIL
Member :	_____	_____	PASS FAIL
Member (optional):	_____	_____	PASS FAIL

COMMITTEE CHAIR ONLY (complete after the oral examination)

The following questions are asked only for SACS accreditation purposes. Please score each item from 0 (unsatisfactory), 1 (somewhat satisfactory), 2 (satisfactory), 3 (proficient), and 4 (excellent). (Please provide a score between 0-4)

	Chair	Member	Member
The student demonstrated expertise...			
1. to review research, interpret and report	_____	_____	_____
2. to understand the concepts, principles, and theories on specific topics	_____	_____	_____
3. to use critical thinking in conducting research and analyze results	_____	_____	_____
4. to effectively use resources to collect, analyze and synthesize information	_____	_____	_____
5. in the oral and written communication	_____	_____	_____

_____ Total Score: _____ % Score: _____
 Committee Chair (signature) Date (out of 60)

DEPARTMENTAL APPROVAL

_____ ECE Graduate Coordinator (signature) Date ECE Department Chair (signature) Date