
Ph.D. Qualifying Exam Application

Directions: Fill out the information below and return the form to Tess Sentelle in 274 Whittemore (Tech campus) or Karen Watson (Wake Forest campus) on or before the Request Application due date as announced by the Graduate Program Committee.

Date of request: _____

Name: _____

Student ID: _____

Program Track: _____

Advisor: _____

Home Campus: _____

Date of Program Entry: (check semester)

Fall Year: _____

Spring

By signing below, I declare that:

1. I intend to take the School of Biomedical Engineering and Sciences Ph.D. Qualifying Exam when it is next offered per the schedule of the Graduate Program Committee.
2. I have received and/or printed from the web a copy of the SBES Ph.D. Qualifying Examination Policies.
3. I have read and understand the exam policies and I agree to abide by them.

Student Signature: _____

Date: _____

Cc: Student
Advisor, if applicable