

## PhD Candidacy Examination Report

Obtaining Candidacy in the School of Nursing involves two important milestones: (1) The Comprehensive Exam; and (2) the Dissertation Proposal and Oral Defense. **PhD students must successfully complete both milestones prior to being awarded PhD candidacy.**

Once the student has met these two milestones, complete this form, forward to the Administrative Assistant (Graduate Programs) who will then forward it to the Faculty of Graduate Studies within **10 working days**.

It is the responsibility of the Supervisor to ensure that the report is signed and submitted .

Student Name: \_\_\_\_\_

### Milestone A: Comprehensive Exam

Date: \_\_\_\_\_

#### Written

\_\_\_\_\_ (Pass)

\_\_\_\_\_ (Fail)

\_\_\_\_\_ (Retake)

#### Oral Examination

\_\_\_\_\_ (Pass)

\_\_\_\_\_ (Fail)

\_\_\_\_\_ (Retake)

If the student has failed the exam and requires a retake, provide a brief summary of the actions to be taken by the Supervisor to support the student going forward and send this form to the Administrative Assistant (Graduate Programs), the AD Graduate Education and to the PhD Coordinator.

**Milestone B: Dissertation Proposal and Oral Defence – Advancing to Candidacy**

Date: \_\_\_\_\_

**Written**

\_\_\_\_\_ (Pass)

\_\_\_\_\_ (Fail)

\_\_\_\_\_ (Retake)

**Oral Examination**

\_\_\_\_\_ (Pass)

\_\_\_\_\_ (Fail)

\_\_\_\_\_ (Retake)

If the student has failed the exam and requires a retake, provide a brief summary of the actions to be taken by the Supervisor to support the student going forward and send this form to the Administrative Assistant (Graduate Programs), the AD Graduate Education and to the PhD Coordinator.

**Examining Committee**

As per the signatures below, the supervisory committee recommends the above named student advance to the status of PhD Candidate based on successful defence of research proposal.

Supervisor:	_____	_____	_____
Co-Supervisor:	_____	_____	_____
Academic Unit Member:	_____	_____	_____
Academic Unit Member:	_____	_____	_____
External Member:	_____	_____	_____
Additional Member:	_____	_____	_____
AD, Graduate Education:	_____	_____	_____
Director:	_____	_____	_____

**Name** (Please Print)

**Signature**

**Date**