Complete steps 1 through 3, in this order, BEFORE submitting this form along with your proposal, bibliographies, outside reader C.V. (if necessary) to the Department Chair:
1) verify language certification with the Academic Programs Coordinator and obtain signature;
2) obtain signatures of committee members;
3) obtain signature of the Dean approving composition of committee;
4) obtain signature of the Department Chair approving the Committee and the Proposal;
5) After final approval, return the completed form, 2 copies of the approved proposal with bibliographies, and outside reader C.V. (if necessary) to the Academic Programs Coordinator.

Name of Student: __________________________ Degree Program: __________ Dept: __________

Language: __________ __________ __________ __________ 

Proficiency: __________ __________ __________ 

Date Fulfilled: __________ __________ __________ 

Academic Programs Coordinator’s Signature __________________________ Date __________

Comprehensive Exam Committee (At least 3 members, signature indicates approval of proposal):

Coordinator (Please print or type) __________________________ School __________________________ Signature __________________________ 

Member (Please print or type) __________________________ School __________________________ Signature __________________________ 

Member (Please print or type) __________________________ School __________________________ Signature __________________________ 

Member (Please print or type) __________________________ School __________________________ Signature __________________________ 

Email and Surface Mail Addresses and Daytime Phone for each Outside Reader (this information is required):

Please attach a CV for each non-UCB outside reader. See Doctoral Program Handbook for more details.

Approval of Committee:

Committee Coordinator __________________________ Date __________

Dean __________________________ Date __________

Approval of Committee and Proposal:

Department Chair __________________________ Date __________