



College of Graduate Studies

Virginia State University

MEMORANDUM OF GRADE FOR ORAL/WRITTEN COMPREHENSIVE EXAMINATION

The Student (Please Print or Type)

Name (Last, First, Mi)

V Number

has taken _____ (Oral/Written Comprehensive Examination)

(Course Number)

required to fulfill requirements for the master's degree in

(Program of Study)

Results are as indicated below.

Passed

Failed

Date on which comprehensive was taken:

Date

Signature of Advisor

Date

Signatures of Committee Members:

