

**ORAL COMPREHENSIVE EXAMINATION PROCEDURES FORM  
MASTER OF ARTS IN TEACHING (M.A.T.)**

**Guidelines:**

1. Oral examinations may be conducted by program faculty (minimum of 3 faculty) between the dates of March 15 and April 30.
2. This form must be completed 10 days in advance of scheduled oral examination and submitted to department.
3. Upon completion of oral comprehensive examination, form BCSS-14 "Pass or Failure of Comprehensive Examination" should be completed by advisor.

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
ID Number

\_\_\_\_\_  
Campus Address

\_\_\_\_\_  
Campus Phone Number

\_\_\_\_\_  
City, State Zip

\_\_\_\_\_  
Home Phone Number

Degree Field: \_\_\_\_\_

Scheduled Date/Times: \_\_\_\_\_  
Date

\_\_\_\_\_ to \_\_\_\_\_  
Times

Testing Room Location: \_\_\_\_\_

Faculty Members Attending (minimum of three with Group I or Group II Status):

1. \_\_\_\_\_  
Advisor

2. \_\_\_\_\_  
Name

3. \_\_\_\_\_  
Name

4. \_\_\_\_\_  
Name

Approval Signatures:

\_\_\_\_\_  
Advisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head/Graduate Coordinator

\_\_\_\_\_  
Date

