

**RECORD OF COMPREHENSIVE EXAMINATION FOR  
DOCTORAL DEGREE IN  
ASTRONOMY AND ASTROPHYSICS**

**Student Name:**

**PID:**

**Term and Year of First Course Counted towards Degree:**

Check if re-examination due to expired time limits

**Date of Successful Second year Project Examination**

**Credits Completed of AST 805 (6 required)**

**RESULTS OF WRITTEN COMPREHENSIVE EXAMS  
(list both subject exam and final grade, if relevant)**

<b>Course Name</b>	<b>Professor/Examiner</b>	<b>Semester</b>	<b>Grade</b>

**Name**

**Signature**

**Date**

**Astronomy Grad Director**

**PA Grad Director**