

Mathematical Sciences Ph.D. Comprehensive Exam Proposal

STUDENT AND ADVISOR INFORMATION:

Student Name:	PSU ID:
Advisor Name:	Advisor Email:

EXAM COMMITTEE MEMBERS:

There must be at least three committee members with the majority having their primary appointment in the Fariborz Maseeh Department of Mathematics and Statistics.

Name	Department	Email

PRIMARY CONCENTRATION

Topic 1:

Examiner(s):

Supporting Courses:

Topic 2:

Examiner(s):

Supporting Courses:

SECONDARY CONCENTRATION

Topic:

Examiner(s):

Supporting Courses:

SIGNATURE: *Please use Adobe "Fill and Sign" to sign below or print the completed document and sign with a pen.*

Student: _____

Date: _____
dd-mmm-yyyy
e.g. 05-Sep-2020

Attached documents:

1. For each topic, provide a syllabus signed by the examiner(s). A committee member can sign, at most, one syllabus.
2. If a committee member is not currently regular PSU faculty, a current CV of that person must be attached.