## SCHOOL OF COMMUNICATION WESTERN MICHIGAN UNIVERSITY

## Master's Program

## FORM VII: ELIGIBILITY TO HOLD COMPREHENSIVE EXAMINATIONS

I request the Director of Gradu	uate Studies f	or the School of Commun	ication determine	;
the eligibility of to take the Master's degree co to held the week of	mprehensive	(PLEASE PRINT) examination scheduled for		_
(DATES)				_
STUDENT SIGNATURE	DATE	ADVISOR SIGNATURE	DATE	
and is therefore eligible to work will be completed sat void, and the examination i	take the comprel isfactorily. Shou must be retaken.	impleted all requirements by the thensive exam as scheduled. This ild the courses not be completed rements. The examination shall	is assumes that all produced in the satisfactorily, this e	esent course eligibility is
APPROVED:				_
DIRECTOR, GRADUATE STUDIES	DATE	DIRECTOR, SCHOOL C	DF COMMUNICATION	DATE

NOTE: This form must be submitted *no less than three (3) weeks* prior to the requested examination date.

Copies: File / Student / Advisor