



WESTERN MICHIGAN UNIVERSITY

Department of  
**Political Science**

**Application for Graduate M.A. Field Exam in Political Science**

Name:

Telephone:

E-mail:

Indicate the examination you plan to take.

**Fields:**

- American Politics
- Political Theory and Philosophy
- Comparative Politics

**Exam Dates:**

- Fall
- Spring
- Summer I

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

*This form must be given to the Department Secretary by the appropriate application due date listed on the department web site.*