M.A. in English ENG 680 Comprehensive Exam Proposal Form

Student's Name (please print)			
Student's ID#			
Faculty Director's Name (please print	±)		
Faculty Member #1's Name (please p	rint)		_
Faculty Member #2's Name (please p	rint)		_
Date of Proposal Meeting with Comm	nittee		
Expected Date of Completion			
You are required to take 6 hours of EN the semester and year in which you as			Please indicate
Fall 20	Spring 20	Summer 20*	ŧ
*Please note that all graduate faculty may not h before planning summer hours.	be available in the summer. Ch	eck with your faculty director a	and committee
Attach a detailed prospectus w	hich includes the fol	lowing information:	
 Reading List with primary an Schedule of meetings, include Description of Written Exam 	ing projected date of Wri	itten and Oral Exams;	
Approval for Proposal			
Faculty Director		DATE	
Faculty Member #1		DATE	
Faculty Member #2		DATE	
Director of Graduate Studies in Engli	ish	DATE	