

PRE-2021 COMPREHENSIVE EXAMINATION CHOICE FORM
Department of Psychology

To be completed by the graduate student prior to beginning the comprehensive exam:

Student Name: _____ Date: _____

Year Entered: _____

I request approval to complete the pre-2021 comprehensive examination, as described in the Graduate Student Handbook. I acknowledge that, once beginning the exam, I cannot switch to the 2021 version of the comprehensive exam.

Student Signature

Student E-mail Address

Please email the completed form to the Graduate Director and your primary mentor prior to beginning the comprehensive exam.