Doctoral Program in Educational Leadership and Administration
REQUEST WRITTEN QUESTIONS for COMPREHENSIVE Exam

Form: EdD 4

Candidate:_____ Cohort #___ Date Entered Program_____
Print name

Date of Request _____

Written Questions Requested of the following:

_____ _____ (Dept.)
Print name

_____ _____ (Dept.)
Print name

_____ _____ (Dept.)
Print name

Please submit written questions electronically to: (select one)

_☐(a) Committee Chair

_☐(b) the Candidate

by:_____

Return of questions due electronically by: _____

_____ (Candidate Signature) _____Date

_____ (Signature) _____ (Date) Committee Chair