



Return to: Kim Crosslan
1312 BPS Bldg

RECORD OF SECOND YEAR PROJECT for
DOCTORAL DEGREE IN
ASTRONOMY and ASTROPHYSICS

☐ Check if this is a re-examination because of expired time limits.

Student Name: _____

PID: _____

Term and Year of First Course Counted towards this Degree _____

Result of Written Comprehensive Examinations:

<u>Field</u>	<u>Examiner(s)</u>	Class Semester	<u>Course grade/ Exam grade</u>
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Mark if dual degree

2nd year project committee members

<u>Examiner(s)</u>	Examination Date <u>(MM-DD-YY)</u>	<u>Passed or Failed</u>
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OVERALL PASS or FAIL? _____

Signed _____ Date _____
Chairperson of 2nd year project

Signed _____ Date _____
Committee member

Signed _____ Date _____
Committee member