



Ph.D. Program in Business

The Graduate School and University Center

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**FIRST EXAMINATION  
FOR  
OBHS STUDENTS**

Name \_\_\_\_\_ Specialization \_\_\_\_\_

SS# \_\_\_\_\_ Course Work Completed \_\_\_\_\_

**RESULTS OF WRITEN PORTION**

Pass \_\_\_\_\_ Fail \_\_\_\_\_

Exam Date \_\_\_\_\_ Coordinator's Signature \_\_\_\_\_

**RESULTS OF ORAL PORTION**

Date \_\_\_\_\_

Fail \_\_\_\_\_

Pass \_\_\_\_\_

\_\_\_\_ Student must repeat written and oral portion

\_\_\_\_ Student repeat oral portion only

Concur:

Dissent:

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Please return to Mrs. M. Karan, PhD Program Office, Room 13-255.

Executive Officer \_\_\_\_\_