



**REPORT OF PROGRESS & TIMETABLE TO  
PhD ORAL QUALIFYING EXAMS**

*Please complete and return to Graduate Academic Affairs, University Office Building #140.  
For questions contact Kara Oswood, 951-827-3387*

Name: \_\_\_\_\_ SID: \_\_\_\_\_

Program: \_\_\_\_\_ Faculty Advisor: \_\_\_\_\_

1. What course work, if any, remains to be completed prior to the oral qualifying exam?  
When will you take these courses?
  
2. What written exams, if any, remain to be completed prior to the oral qualifying exam?  
When will you complete these exams?
  
3. What language exams/requirements, if any, remain to be completed prior to the oral qualifying exam? When will you complete the language requirement?
  
4. What other work remains to be completed prior to the oral qualifying exam? For example: research projects, papers, prospectus, readings, etc... Please include a detailed outline, including dates, of when these items will be completed.
  
5. If you have submitted a timetable to orals before, please explain why you were unable to complete the exam as anticipated in your previous timetable.
  
6. Tentative Oral Qualifying Exam date:

Student Name: \_\_\_\_\_

Program: \_\_\_\_\_

**GRADUATE ADVISOR OR FACULTY ADVISOR COMMENTS:**

1. Do you consider the student to be making adequate academic progress?
  
  
  
  
  
  
  
  
  
  
2. When do you recommend the student take their oral qualifying exam?
  
  
  
  
  
  
  
  
  
  
3. Do you have any comments about the student's progress or proposed timeline?
  
  
  
  
  
  
  
  
  
  
4. Do you recommend the student be permitted to register?

X \_\_\_\_\_  
REQUIRED: Signature of Student Date

X \_\_\_\_\_  
OPTIONAL: Signature of Faculty Advisor (as needed) Date

X \_\_\_\_\_  
REQUIRED: Graduate Advisor Date