

352 Lafayette Street Salem, MA 01970-5353 978-542-6323 Salemstate.edu/graduate graduate@salemstate.edu

Comprehensive Exam Application

Contact information:					
Name: (last, first, middle, fo		Student ID:		D:	
Mailing address: (street/i		Apt #	City	State	Zip
Telephone:		SSU email	:	•	•
Indicate your program of Number of credits earned	ed in your graduate pro	_	onsult with your pro	gram coordinator about	when to take the exam.)
Indicate any courses in Course Number:	Title:	iy enrolled:			
Course Number.	ritie.				
I am applying to take th Are you a veteran?	Deadline	(check one): March 18 of March 18 of March application		☐ July 8, 202 ebruary 17, 202	
Have you taken the con		alem State before: 🗌 ነ	′es □ No	o If yes, when?	•
What is your anticipated	aduation? Month:		Year:		
What is your testing pre	eference (check one)?	☐ Computer ☐ P	encil/paper		
 Any student who f date. Any registered stu of Graduate Studineed to re-apply, in take the exam and should be written in jbubier@salemsta 	ed two attempts to pass to ails all or part of the example and the example and the example at th	tam, you should be aware the comprehensive examm will need to re-apply to arr as scheduled to take the ticipated absence will be ation fee, to take the exammate Studies in writing priomake the exammon the next of Jeremy Bubier, School of the company and expectations settions, and expectations settions.	nination.* retake the endered has been determined in the exame date. If Graduate Saddressed or	exam on the next d who has not in a no-show. All t scheduled exa n if he or she wi Such unexpect Studies, at n a case by case	of scheduled examination of the School no-shows will am date. It not be present to steed circumstances the basis.
The \$50 application fee	will be billed directly to	o your student account	-		
Signature:					
Student:			Date	signed:	

^{*}Salem State Graduate On-Line Course Catalog, 2022-2023