INTENT TO WRITE COMPREHENSIVE EXAMINATION  
Department of Religious Studies  
THIS FORM IS TO BE COMPLETED IN CONSULTATION WITH YOUR SUPERVISOR

Student Name: _____________________________   Student Number: _______________

Exam Session: ______________________________ (Fall, Winter, Spring, Summer)

Exam to be Written (circle one): Major  
Minor

Area: ______________________________________

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Readers

Exam I (Day 1):
Name of 1st Reader (please print) ______________________ Initials _____________
Name of 2nd Reader (please print) ______________________ Initials _____________

Exam II (Day 2):
Name of 1st Reader (please print) ______________________ Initials _____________
Name of 2nd Reader (please print) ______________________ Initials _____________

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Bibliography

- A FINAL BIBLIOGRAPHY has been agreed upon and a copy has been received by both readers and the student (please sign below).
- Please attach a copy of the bibliography to this form.

__________________________________________
Student Signature

__________________________________________
Reader Signature

__________________________________________
Reader Signature

__________________________________________
Reader Signature

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Advisory Committee

Initials indicate approval of the dates and examiners listed above.

Name: ___________________________________ 
Initials: ________________________________

Supervisor: _______________________________ 
Initials: ________________________________

Members: ________________________________ 
Initials: ________________________________

__________________________________________

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Duration of Examinations: In writing the major examination, there usually will be two equal parts, each a maximum of five hours, written on different days; for the minor, there usually will be two equal parts, each of a maximum of four hours, written on different days.