MUIDSI Comprehensive Exam Request Form			
Student Name:			
Student ID:	Scheduled Date:		
Facutly Advisor:			
Comprehensive Exam Committee Member Information			
	Name	MUIDSI Affiliation/Tenure Dept	Email Address
Committee Chair			
Outside Member			
Committee Member			
Committee Member			
Committee Member			
Committee Member			
Publication Information Please list all publications since joining MUIDSI.			