



Please Return to: Once approved,
please submit as an email attachment
to k.flagg@miami.edu or deliver to
Orovitz Building, Room 311

MASTER'S / SPECIALIST STUDENT

KINESIOLOGY & SPORT SCIENCES
Comprehensive Exam Application

Revised: 09/2019

NOTE: Completed application for the exam must be received in the Office of Graduate Studies. If you have any further questions please contact Kelley Flagg at 305 284 2102.

UMID: _____ Major: _____

Name: _____ Phone Number: _____

Local Address: _____

Mailing Address: _____

Email Address: _____

Please read carefully BEFORE signing:

1. I certify that I will have completed my coursework or am enrolled in my last 6-9 credits.
2. I certify that I have applied or will apply for graduation.
3. I certify that I have submitted my Program evaluation form.
4. Students requesting accommodations because of a disability are required to go through Accessibility Resources (305-284-4010) to document their disability. Once the disability is documented, the department and the student need to facilitate making the arrangements.
5. Would you prefer to take your exam by computer? (Limited to availability of computers.)

NOTE: You must have proficient computer skills. Assistance WILL NOT be available.

Yes

No

Student's Signature

Date

Program Advisor

Date