

**Lamar University
Department of Deaf Studies and Deaf Education
Doctoral Program in Deaf Education (Ed.D.)
Preliminary Examination Committee**

Date: _____

Candidate's Name _____ LU#: _____

Preliminary Examination Committee Composition:

Doctoral Advisor: _____

Committee Member: _____

Committee Member: _____

Department Chair _____
Date

Dean of Fine Arts and Communication _____
Date

COMMENTS BY GRADUATE DEAN: _____

FINAL ACTION: _____

Dean of Graduate Studies _____
Date