



**PhD in Kinesiology Sciences**  
**EDKP 701-Comprehensive Examination (0 credits)**  
**Evaluation Form**

**Objectives.** The purpose of comprehensive examinations is to determine whether the student demonstrates the necessary research skills and academic achievements to continue in the Ph.D. program. The Comprehensive Exam constitutes a written and oral component. A pass on both components is required.

|                      |  |                        |  |
|----------------------|--|------------------------|--|
| <b>Student Name:</b> |  | <b>Student Number:</b> |  |
| <b>Supervisor</b>    |  |                        |  |
| <b>Co-Supervisor</b> |  |                        |  |

| Comprehensive Examination Evaluation Committee    |   |
|---|---|
| Name (including supervisor if a committee member) | Role (Chair or committee member), Affiliation |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |

| Comprehensive Examination               |  |
|---|--|
| Start date of comprehensive examination |  |
| End date of written component           |  |
| Date of oral component                  |  |

**Comprehensive examination themes/questions**

|                         |  |
|-------------------------|--|
| <b>Theme/Question 1</b> |  |
| <b>Theme/Question 2</b> |  |
| <b>Theme/Question 3</b> |  |



**PhD in Kinesiology Sciences  
EDKP 701-Comprehensive Examination (0 credits)  
Evaluation Form**

**Comprehensive Examination Evaluation**

|                     |             |             |
|---------------------|-------------|-------------|
| <b>WRITTEN EXAM</b> | <b>PASS</b> | <b>FAIL</b> |
| <b>ORAL EXAM</b>    | <b>PASS</b> | <b>FAIL</b> |

**Signatures:**

|  |                    |               |
|--|--------------------|---------------|
| _____<br>Student (Print name)                                | _____<br>Signature | _____<br>Date |
| _____<br>Chair of Comps Committee (Print name)               | _____<br>Signature | _____<br>Date |
| _____<br>Comps Committee member (Print name)                 | _____<br>Signature | _____<br>Date |
| _____<br>Comps Committee member (Print name)                 | _____<br>Signature | _____<br>Date |
| _____<br>Comps Committee member (Print name)                 | _____<br>Signature | _____<br>Date |
| _____<br>Comps Committee member (Print name)                 | _____<br>Signature | _____<br>Date |
| _____<br>DKPE Graduate Office representative<br>(Print name) | _____<br>Signature | _____<br>Date |



**McGill**

Faculty of  
Education

Department of  
Kinesiology and Physical Education

**PhD in Kinesiology Sciences  
EDKP 701-Comprehensive Examination (0 credits)  
Evaluation Form**

**Comments**

Submit form to the Administrative & Student Affairs Coordinator, Room 216,  
475 Pine Avenue West, Montreal, Quebec, Canada H2W 1S4  
or by email to [studentaffairs.kpe@mcgill.ca](mailto:studentaffairs.kpe@mcgill.ca)

Version: April 2020