



COMPREHENSIVE EXAMS

S.T.D.

GRADE REPORT FORM

Doctorate of Sacred Theology

Student's Name: _____

Examiners Names (Please Print): _____

: _____

Instructions to Comprehensives Committee:

Please check one of the following grade options and return form to the JST Registrar's office.

Note: The grade must be agreed on by both members of the committee.

_____ **Pass** with No Revisions

_____ Does **Not** Pass

(1) Signature of Faculty Examiner

Date

(2) Signature of Faculty Examiner

Date