



# Department of Bioengineering

UNIVERSITY OF COLORADO  
DENVER | ANSCHUTZ MEDICAL CAMPUS

## Request for Preliminary Examination

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*This document should be completed and submitted to Student Services (Bioscience 2, Suite 100) no later than two weeks before one's exam. Upon submission of this form, Student Services will generate the Preliminary Examination Report. Note that the advisor's signature is required on this form before submission.*

**Track:**       Basic Research               Translational Bioengineering               Entrepreneurship

**PhD Student Name:** \_\_\_\_\_ **Student ID #:** \_\_\_\_\_

### Exam Details

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**Date:** \_\_\_\_\_

**Time:** \_\_\_\_\_

**Location:** \_\_\_\_\_

### Preliminary Examination Committee Details *(min. of three members / two must be BIOE Core)*

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**BIOE Core Faculty Advisor/Chair:** \_\_\_\_\_

**Research Advisor (if different than above):** \_\_\_\_\_

**Additional Committee Members:**

\_\_\_\_\_  
\_\_\_\_\_

### Student Checklist

- Read the PhD Candidate Preliminary Exam Description document
- Meet with my research mentor and/or BIOE Core Faculty Advisor to discuss expectations
- Identify three fundamental knowledge areas
- Submit Prelim Exam Committee proposal to the the Graduate Affairs Committee
- Reserve a room for exam and/or practice exam (see Graduate Program Manager for assistance)
- Prepare and distribute research and training plans to my Exam Committee no later than 2 weeks in advance of the exam date

PHD BIOE Core Faculty Advisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Research Advisor Signature (if different than above): \_\_\_\_\_

Date: \_\_\_\_\_

Chair Signature: \_\_\_\_\_

Date: \_\_\_\_\_