The Department of Library and Information Science

COMPREHENSIVE EXAM CHECKLIST

NAME:	I.D	Preferred Contact Phone No
CUA EMAIL: OTHER EMAIL:		HER EMAIL:
PREVIOUS DEGREE(s):		
COURSE OF STUDY:		
SEMESTER TAKING COMPS:		
[] Meet with your advisor to:		
 Discuss your course taking statu Discuss your readiness & prepar Ask any questions or express an If you do not know who your ad 	ration for comps y concerns about co	mps act the Department - (cua-lis@cua.edu)
Additional points for students:		
[] Familiarize yourself with LIS compre	hensive exam resou	rces
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[] Complete below Verification form –	•	·
[] PRIOR ADVANCED DEGREE? To be el transcript of your advance degree, a program. Please confirm with the a	ligible to sit for compand your degree mu	rtment (cua-lis@cua.edu) ps with 30 credits, the department must have an official st have been received before you began the M.S.L.I.S (cua-lis@cua.edu) that your official transcript is on file.
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CREDIT HRS. REQUIRED FOR GRADUATION: _____ PREVIOUS ADVANCE DEGREE(s): YES [] NO [] CREDIT HRS. COMPLETED: _____ CREDIT HRS. PENDING IN SEMESTER TAKING COMPS: ____ CORE CURRICULUM COURSES MET LSC 551 () LSC 553 () LSC 555 () LSC 557 () SLM requirements met () 695B SLM Practicum () CID# _____