## UPPER DIVISION PROFICIENCY EXAM EVALUATION FORM

Stud	ent Name:		Student ID:	
Sem	ester and Year of Initial Enrolln	nent at MSU:		
Majo	r:		Principal Applied Area:	
Advis	sor:			
OR	AL PRESENTATION AN	ID PERFORMANCE:	1	
	Overall G.P.A. at time of exa	am:		
	Date of Exam:			
	Grade (must be 70% or high	ner to pass):		
	First Attempt:	Second Attempt:	Third Attempt:	
	Signature of Faculty:			
	Signature of Faculty:			
	Signature of Faculty:			
WR	ITTEN THEORY:			
	Overall G.P.A. at time of exa	am:		
	Date of Exam:			
Grade (must be 70% or higher to pass):				
	First Attempt:	Second Attempt:	Third Attempt:	
	Signature of Faculty:			
AUF	RAL THEORY:			
	Overall G.P.A. at time of exa	am:		
	Date of Exam:			
	Grade (must be 70% or higher to pass):			
	First Attempt:	Second Attempt:	Third Attempt:	
	Signature of Faculty:			