

EDUCATIONAL PSYCHOLOGY

WRITTEN PRELIM REGISTRATION FORM

Note to adviser: Students must submit their *Degree Program* before proceeding to the Written Prelim. This verifies that the student's Program has been filed. Please remember to submit the **Preliminary Written Examination Report – Doctoral Degree** form once the written prelim requirement has been satisfactorily met.

Student Name: _____

Student ID #: _____

Student E-mail: _____

Degree Program filed: _____
(date)

Program (circle one): **CSPP** **PsyF** **QME** **SchlPsy** **SpEd**

Area (for PsyF/QME students): _____

Register for written prelim: _____, _____ **on** _____
(semester) (year) (date)

Adviser Signature: _____ **Date:** _____

DGS Signature: _____ **Date:** _____
