



Ph.D. Program in Mathematics
The Graduate Center of CUNY

Qualifying, Oral, and Foreign Language Exam Notification

Memorandum:

To: _____
From: _____
Date: _____
Re: _____

Please be notified that _____ Banner ID: _____
Student Name

Has successfully passed his/her _____ on _____

Title of Oral Exam: _____

Committee Members:

Name: _____ Affiliation: _____
Name: _____ Affiliation: _____
Name: _____ Affiliation: _____