

**University of Arkansas
Mechanical Engineering Department**

REQUEST TO TAKE QUALIFYING EXAMINATION

This form must be submitted to the MEGSC no later than four weeks prior to the scheduled date of the qualifying examination. The student must have completed any deficiencies required, before submitting this form.

NAME _____ ID _____

Check 3 of the following areas. At least 2 of the areas chosen must be traditional.

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APPROVED

Major Professor

Date

ME Graduate Studies Committee

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