

**Middle Tennessee State University
Department of Health & Human Performance
Master of Science
Comprehensive Examination Application**

Candidate's Name: _____

Date of Exam: **Friday, March 16, 2007** Time: **1:00 P.M. until 4:00 P.M.** Location: **MC101**

CONCENTRATION AREA (select one):

HEALTH PHYSICAL EDUCATION RECREATION
EXERCISE SCIENCE SPORT MANAGEMENT

The comprehensive examination will be constructed with one question from the Research Methods course and two questions from your concentration area.

The Health & Human Performance Graduate Program Office **must be notified 24 hours in advance** if a student has registered to sit for the comprehensive exams and is unable to take them.

A student who does not show up for the exams must provide evidence of extenuating circumstances to the Health & Human Performance Graduate Program Office. The no show will be considered a failure if 24 hours notification is not received within 2 working days, and/or the student does not have documented extenuating circumstances.

Student's Signature: _____

Student's Address: _____

City _____ State _____ Zip _____

Student's Phone Number(s) _____

E-Mail Address: _____ Student's MTSU P.O. Box _____

Advisor's Signature: _____

Students with Disabilities:

Persons with disabilities or special needs must contact John Harris, Director of Disabled Students in KUC 120 to make arrangements for their testing.

Return completed application form to Murphy Center, Room 122 before 3:00 P.M. on Friday, February 16, 2007.