



Republic of the Philippines
CENTRAL LUZON STATE UNIVERSITY
Science City of Muñoz, Nueva Ecija

DISTANCE, OPEN, AND TRANSNATIONAL UNIVERSITY

REQUEST FOR COMPREHENSIVE EXAMINATION QUESTIONS

Date: _____

MEMORANDUM TO:

Subject: Comprehensive Examination of _____

In connection with the comprehensive examination of _____ which will be held on _____, you are requested to submit two (2) examination questions on the course(s) which the student took under you, as follows:

_____.

Kindly submit your questions on or before _____.

Thank you for your cooperation.

Chairperson, Comprehensive Examination Committee