ORAL COMPREHENSIVE EXAMINATION EVALUATION

Student's Name:		EXAMINATION DATE:	
TOPIC TITLE:			
Examiner:			
LAGITITIET.			
1.	Demonstrates the ability to acq Comments:	uire, synthesize and cri	cically evaluation nursing knowledge
2.	Responds to questions raised by Comments:	y the Examiner's review	of the proposal
3	Demonstrates an understanding Comments:	g of the fundamentals c	f the topic of the written components
4	Demonstrates critical analysis of <u>Comments</u> :	f each issue	
5.	Demonstrates the ability to pre Comments:	sent and defend an arg	ument
Summary of strengths and limitations:			
Please check one of the following:			
Pass With Distinction:		Pass:	Fail:

Revised June 2017