DEPARTMENT OF ANTHROPOLOGY COLUMBIA UNIVERSITY

ACE/ORALS EXAMINATION REPORT

PLEASE PRINT

Date:	
Name:	
Address:	
Phone #:	
	low the written portion of the Advanced Certifying
List Faculty Committee:	Faculty Committee Signature:
1	
2	
3	
4	
ACE #1 – Exam:	Readers:
1	1
2	2
3(only if you had a 3 rd reader)	(only if you had a 3 rd reader)
(only if you had a 3 ^{ra} reader)	(only if you had a 3 ^{ra} reader)

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ACE #2 - Exam Topic:	Readers:			
1	1			
2	2			
3(only if you had a 3 rd reader)	_ 3 (onl ₂	3(only if you had a 3 rd reader)		
Outcome of exam #1 (please check one)		Pass High Pass Fail Re-take		
Outcome of exam #2 (please check one)		Pass High Pass Fail Re-take		
Comments:				
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