

Oral Competency Examination Registration: Part II
(please print clearly)

Name _____

Date Submitted: _____

Student Number _____

Term _____
(e.g., Winter 2005)

Address

Street

Apt #

City

State

Zip code

Telephone (_____) _____

E-mail _____ (this MUST be included)

Class Standing: (*circle*) First year Sophomore Junior Senior Grad

College you are enrolled in _____

Major: _____

In which semester and year did you pass Part I? _____

Payment enclosed via: _____ check _____ money order

Please check the equipment that you will need for your speech:

_____ Computer (PC only) _____ Projector

_____ Sound from computer _____ Overhead projector

Please note: the Department of Communication is not responsible for provided computers that are not equipped to handle the presentation aid constructed by speakers. (That is, for example, if you construct a PowerPoint presentation with pictures, and the pictures do not show up, the Department of Communication is not responsible.) ALWAYS have a back up for your presentation aids. ***We do not suggest that you plan on having internet access. We cannot guarantee internet access.***

----- **For Office Use Only**

Received by _____

Date Taken

Results

Notified?

Part 1 _____
(administered by Testing and Evaluation)

Part 2 _____
(administered by the Department of Communication)