

**TULANE UNIVERSITY**  
**DEPARTMENT OF ANTHROPOLOGY**  
**DOCTORAL ORAL EXAM FORM**

This is to certify that \_\_\_\_\_ has been  
given an oral examination as one of the requirements for the Ph.D. degree in anthropology at  
Tulane University.

Area \_\_\_\_\_

Passed \_\_\_\_\_ (yes/no)

Date \_\_\_\_\_

Examination Committee:

Chair \_\_\_\_\_

Member \_\_\_\_\_

Member \_\_\_\_\_

Member \_\_\_\_\_

Member \_\_\_\_\_