



NORTHERN  
ILLINOIS  
UNIVERSITY

**Department of Communication**

Competency Area Approval Form

Student Name: \_\_\_\_\_

Date of Approval: \_\_\_\_\_

<p><b>Competency Area 1:</b></p> <p>Parameters of Exam Questions: _____</p> <p># of Hours _____</p> <p>Content Description: _____</p> <p>Responsible Faculty Member(s): _____</p>
<p><b>Competency Area 2:</b></p> <p>Parameters of Exam Questions: _____</p> <p># of Hours _____</p> <p>Content Description: _____</p> <p>Responsible Faculty Member(s): _____</p>
<p><b>Competency Area 3:</b></p> <p>Parameters of Exam Questions: _____</p> <p># of Hours _____</p> <p>Content Description: _____</p> <p>Responsible Faculty Member(s): _____</p>

\_\_\_\_\_  
(Supervisory Committee Chair)

\_\_\_\_\_  
(Committee Member)

\_\_\_\_\_  
(Committee Member)

\*A copy of the student's accepted program of study proposal must be filed with this form.