

NOMINATION TO CANDIDACY FOR THE PH.D. DEGREE

Name of Student _____ Campus I. D. _____

Current Mailing Address _____

Department _____ Date of Enrollment/Univ. Graduate School _____ Birth Date _____

Date of Qualifying Exam _____ (Mo/Da/Yr) Date Candidacy Expires _____

Total Graduate Credits Earned (Including Transferred Credits) _____

REQUIREMENT COMPLETION DATES

Major _____

Minor _____ Date _____ / _____ / _____

Minor _____ Date _____ / _____ / _____

Language Proficiency (If student is using research skill, please list courses)

_____ Date _____ / _____ / _____

_____ Date _____ / _____ / _____

This certifies that the above named student has passed the Qualifying Examination and is hereby nominated to candidacy for the Ph.D. degree.

Advisory _____

Committee _____

Signatures _____

Outside Minor _____
(Outside Minor Examination Passed)

Or _____
(Outside Minor Examination Waived)

Chair or Graduate Advisor/Major Dept. _____ Date _____

Information Verified/Ph.D. Recorder _____ Date _____
University Graduate School

Approved/Dean _____ Date _____
University Graduate School

Do not submit this form to the University Graduate School until the transfer of all credits from other institutions has been approved. 08/01