

Application for Admission to Ph.D. Degree Candidacy

Date:		
Last Name:	First Name:	MI:
Student ID:	Department:	
Date of Admission	Advisor	
I confirm that all requirements for the Ph.D been met.		
Ph.D. Student	Date	
Certification and Requirements: We have examined the entire gradua		
3.0 (B) has been maintained on all g courses on the Program of Study. N part of the Program of Study.		<u> </u>
Written and oral comprehensive (Properties of the Ph.D. Program Comprehensive)	<u>-</u>	tions have been passed and
A dissertation proposal has been sub	omitted and approved	
We recommend that this student be admi	itted to candidacy:	
Ph.D. Advisor	Date	
Associate Dean for Graduate Studies and	Research Date	