

The University of Texas at San Antonio

One UTSA Circle | San Antonio, Texas 78249

APPLICATION FOR CANDIDACY FOR THE DOCTORAL DEGREE

STUDENT INFORMATION

Name _____
myUTSA ID

Anticipated Graduation Date _____
Degree Sought _____
Program of Study

Title of Dissertation (Subject to Change)

Signature _____
Date

-
- | | |
|---|---|
| <input type="checkbox"/> Level of English proficiency is satisfactory | <input type="checkbox"/> Program of Study is satisfactory |
| <input type="checkbox"/> Scholarship to date is satisfactory | <input type="checkbox"/> Qualifying exam administered |

Supervising Professor for Dissertation, Signature _____
Print Name _____
Date

Dissertation Committee Member, Signature _____
Print Name _____
Date

Dissertation Committee Member, Signature _____
Print Name _____
Date

Dissertation Committee Member, Signature _____
Print Name _____
Date

Dissertation Committee Member, Signature _____
Print Name _____
Date

Outside Examiner, Signature _____
Print Name _____
Date

Supervising Professor, Signature _____
Print Name _____
Date

DOCTORAL PROGRAM COMMITTEE RECOMMENDATIONS

Based upon this student's performance to date and the attached Program of Study:

- We recommend that the student be advanced to candidacy We do not recommend advancement to candidacy at this time

Chair, Doctoral Program Committee, Signature _____
Print Name _____
Date

Department Chair, Signature _____
Print Name _____
Date

Associate Dean of the College, Signature _____
Print Name _____
Date

THE GRADUATE SCHOOL

Based on the College's recommendation, I hereby Approve Deny Candidacy.

Vice Provost and Dean of The Graduate School _____
Date