

# UC DAVIS

## GRADUATE STUDIES

Candidacy for the Degree of Master of:

☐ Advanced Study | ☐ Arts | ☐ Engineering | ☐ Law ☐ Professional Accountancy  
☐ Public Health | ☐ Science | **Plan II – Comprehensive Exam Plan**

### INSTRUCTIONS TO APPLICANT

Please complete both pages, secure appropriate departmental approvals, and file this form with Graduate Studies. Please consult Graduate Studies and your graduate program for filing deadlines.

**NOTE:** \$55 Candidacy Fee must be paid at Cashier's Office before this form is presented to Graduate Studies. Fee subject to change without notice.

Last Name	First Name	Middle Name	Student ID Number
Current Address	City	State/Zip Code	Telephone Number
Degree Sequence Number	Graduate Program	Program Code	E-mail

All requirements including comprehensive examination to be completed by: (fill in one)

June 20\_\_\_\_ September 20\_\_\_\_ December 20\_\_\_\_ March 20\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### DEPARTMENT APPROVAL

Graduate Program Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Advisor with signing authority)

Print Name: \_\_\_\_\_

Graduate Program Coordinator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

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### LIST ONLY COURSES RELEVANT TO DEGREE

Upper division courses completed or to be completed for the Master's degree	Leave Blank	Units	Quarter and Year taken	Institution	Instructor
Graduate level courses completed or to be completed for the Master's degree					
Graduate Studies use only: TOTAL UNITS LISTED					

### GRADUATE STUDIES SECTION

Matriculation: \_\_\_\_\_ Fee Paid: \_\_\_\_\_ Comp Exam Date: \_\_\_\_\_

Full Time: \_\_\_\_\_ Qtrs/Res: \_\_\_\_\_ Degree Conferred: \_\_\_\_\_

G.P.A.: \_\_\_\_\_ Registered/Filing Fee: \_\_\_\_\_ (at time of submission)

Deficiencies: \_\_\_\_\_

### APPROVED

Dean of Graduate Studies Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Initials: \_\_\_\_\_