

*Please Note: A student may NOT file this form and graduate in the same semester or summer session.*

**All Information Must Be Typed**

Student's Name: \_\_\_\_\_  
*First MI Last*

Z Number: \_\_\_\_\_ Date: \_\_\_\_\_

Degree Objective: ☐ Ph.D. ☐ Ed.D. ☐ D.N.P. Major: \_\_\_\_\_

**Doctoral Qualifying Examination(s) Passed:**

Written Examination \_\_\_\_\_ Date \_\_\_\_\_

Oral Examination \_\_\_\_\_ Date \_\_\_\_\_

**Proposed Dissertation Title:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Candidate (Signature)

**Supervisory Committee Signatures**

We, the undersigned, certify that the above-named student has passed the written comprehensive examination and completed the language and research tool (if required) for the Doctoral Degree. We recommend the student for admission to Candidacy for the degree.

\_\_\_\_\_  
Chair (Signature)

\_\_\_\_\_  
Member (Signature)

\_\_\_\_\_  
Member (Signature)

\_\_\_\_\_  
Member (Signature)

\_\_\_\_\_  
Member (Signature)

\_\_\_\_\_  
Member (Signature)

We, the undersigned, record our dissenting vote.

\_\_\_\_\_  
Member (Signature)

\_\_\_\_\_  
Member (Signature)

**Admission to Candidacy Approved by Department, College, and the Graduate College:**

\_\_\_\_\_  
Department Chair (Signature) Date

\_\_\_\_\_  
College Dean or Designee (Signature) Date

\_\_\_\_\_  
Dean of the Graduate College (Signature) Date