



Office of the Registrar

Change to PhD Candidate Status

Current Semester: Fall Winter Spring Summer Year: _____ Today's Date: ___/___/___ (DD/MM/YY)

Student Name:

First

Middle

Last

Student ID

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Program: _____

Effective Semester/Year: _____

Pocket ID:

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Approval

This student has passed the PhD subject comprehensive examination and/or other requirements to achieve candidate status for the above program on ___/___/___(DD/MM/YY).

PhD Supervisor: _____ Date: ___/___/___
(name) (signature)

Program Chair: _____ Date: ___/___/___
(name) (signature)

Dean: _____ Date: ___/___/___
(name) (signature)

Comments: (for official Use Only):

Graduate Program Coordinators Use Only:

Received by: _____ Date: _____

Registrar 's Office use Only:

Received by: _____ Date: _____

Approved Yes No

Processed by: _____
Date: _____