



Graduate School

UNIVERSITY OF COLORADO
ANSCHUTZ MEDICAL CAMPUS

Application for Candidacy

NOTE: Requires Adobe Acrobat to fill-in and sign

This application is to be completed by the student, recommended by the appropriate designated faculty, and submitted to the Graduate School by the published deadline.

Degree for which you are applying for candidacy: Master's PhD Date

Name as on University Records (Last, First Middle) Student Number

Email Address

Degree/Program

Option/Emphasis:
(If Applicable)

<u>For Doctoral Students Only:</u> Preliminary Exam Date:	<u>For Master's Students Only:</u> Degree Plan: Thesis (Plan I) Non-Thesis (Project/Plan II) Approx. semester in which you are graduating: _____
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Certificate (if applicable:)

Examination Committee (Master's - List your final examination committee) (Doctoral - List your comprehensive exam committee)

Chair: Member:

Member: Member:

Member: Member:

Student Signature:

To be Completed by the Student's Graduate Program:
The admission of _____ Name _____ to candidacy for the _____ degree is recommended by the _____
_____ program upon completion of the minimum requirements of _____ semester hours. The courses
listed on the following pages have been approved for use toward the degree. Do Not Include
Dissertation Hours

Advisor Name	Advisor Signature
Co-Advisor Name	Co-Advisor Signature
Program Admin Name (Anschutz only)	Program Admin Signature (Anschutz only)
Program Director Name	Program Director Signature

Grad School Approval:

List courses below that will apply toward your degree in chronological order (**beginning with the oldest and ending with the most current**). Course numbers/names, credit hours, and grades must match those recorded on your transcript. **YOU MAY NOT SIMPLY ATTACH A TRANSCRIPT.** Transfer courses and thesis/dissertation/project/ report hours should be listed in the appropriate sections of this form.

Instructor (First Initial, Last Name)	Semester	Year	Title of Courses Taken at University of Colorado	Department and Course Number	Semester Hours	Grade	Notes

For Graduate School
Use Only
Subtotal:

List courses (page 2)

Instructor (First Initial, Last Name)	Semester	Year	Title of Courses Taken at University of Colorado	Department and Course Number	Semester Hours	Grade	Notes

For Graduate School
Use Only

Subtotal:

Thesis, Dissertation, Research Paper, Project or Report Hours

Instructor (First Initial, Last Name)	Semester	Year	Thesis/Dissertation Project/Report	Department and Course Number	Semester Hours	Grade	Notes

For Graduate School
Use Only

Subtotal:

Transfer Credits

Courses taken as non-degree an at other CU campuses are not considered transfer, since they appear on your transcript.

Institution at Which Courses were Taken	Semester	Year	Title of Courses to be Transferred	Department and Course Number	Semester Hours	Grade	Notes

For Graduate School
Use Only

Subtotal:

Total: