

Graduate Studies Advancement to Candidacy

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Name		Student ID Number	
		Telephone Home/Cell	
Email Address		Authorized Concentraion	
Master's Program	Education	MA Pathway	

Proposed Title and Short Description of Thesis/Cognate

Special Requirements for Advancement		Date
Requirement:	Portfolio	
Writing Proficiency	Requirement	Date
Portfolio		
committee and the U	ment, I agree to accept the responsibility of preparing a manuscript that meets the standards of the Iniversity [as outlined in the Guidelines for Master's Theses and Projects published by the univer	rsity].
Student Signature	e (Digital Signature Acceptable)	Date

In signing this document the committee agrees to accept the roles and responsibilities assigned to the task of acting as evaluators of the quality and substance of this student's final project [as outlined in the Guidelines for Master's Theses and Projects published by the university].

Committee	Name (Typed)	Signature (Digital Signature Acceptable)	Date
Chair			
Second Member			
Third Member			
Fourth Member			
Graduate Coordinator			

For Graduate Studies Office Use Only:

Review and Data Update:	Signature	Date
Graduate Studies Clearance		
Status Updated to REC3 in Peoplesoft		