

Graduate Studies Advancement to Candidacy

GSO₁

Name		Student ID Number	
		Telephone Home/Cell	
Email Address			
Master's Program	Film Studies		

Proposed Title and Short Description of Final Project (4 lines)--Use a second page for a long Description

ecial Requiremen	ts for Advancement,	f any (i.e., oral qualifying exam, etc.)	Date
Requirement			
How Met by Student			
riting Proficiency	Requirement (please	do not leave blank)	Date
WEPT Passe	d		
Other Approx	ved Option (Specify)		
Judent Dignature	(Digital Signature A	ceptubie)	Date
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Committee Committee Chair Second Member Third Member Fourth Member Graduate Coordinator	bstance of this student versity]. Name (Typed)	's final project [as outlined in the Guidelines for Master's Theses and Pa	rojects
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Committee Chair Second Member Third Member Fourth Member Graduate Coordinator Or Graduate Studi Review and Data	Name (Typed) Per Office Use Only: Update: Signature	's final project [as outlined in the Guidelines for Master's Theses and Pa	Date