DINERSITE 18 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	The Office	ARYLAND, COLLEGE PARK e of the Registrar ADMISSION TO CANDIDACY E DEGREE OF
Directions: Read carefully the specific requirements for the doctoral degree as set forth in the Graduate Catalog. Complete this form and have it endorsed by your advisor and the Director of the Graduate Program in which the degree is offered. This form must be received by The Office of the Registrar prior to the 25 th of the month in order for the advancement to be effective the first day of the following month. All admission provisions must be met in order to advance to candidacy.		
Print Full Name (Last, First, Middle)		Student ID Number
		Graduate Program Code
Address		
City, State, ZIP		Degree Sought:
(Area Code) Telephone		Email Address
Date Comprehensive Examination	Completed	
To the Advisor: By endorsing this application, you are attesting that, in the opinion of the student's professor, he or she has undergone the necessary preliminary examinations or such other substantial tests as the program may elect as prerequisites to candidacy, and has demonstrated the ability to continue graduate study in the chosen field successfully and to pursue the degree sought. Please print name and sign below, where indicated.		
Academic Advisor's Name (Print)		Email Address / Extension
Academic Advisor's Signature	Date	898 / 899 Section Number
Graduate Program Director's Signa	iture Date	Email Address / Extension
Registrar or Designee	Date	
Please return this form to:		
The Office of the Registrar 1113 Mitchell Building University of Maryland, College Park 20742 301 314 8240 Fax: 301 314 9568		