



# GRADUATE SCHOOL

Mike Loya Academic Services Building, Room 223  
The University of Texas at El Paso  
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(915) 747-5491 Fax (915) 747-5788  
www.utep.edu/graduate

## DOCTORAL STUDENT PROGRESS REPORT Submit to the Graduate School

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student ID Number: \_\_\_\_\_ Student E-mail Address: \_\_\_\_\_

Degree & Major: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

Have you reached & filed for Candidacy? \_\_\_\_\_ Candidacy Conferral Date: \_\_\_\_\_

### Dissertation Committee

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1. What progress have you made toward your degree in the past year? (Do not include progress recorded in a previous report.)

2. List the remaining requirements for your dissertation and a timetable for completion.

**Name**

**Signature**

**Date**

CANDIDATE: \_\_\_\_\_

\_\_\_\_\_

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DISSERTATION SUPERVISOR: \_\_\_\_\_

\_\_\_\_\_

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DOCTORAL PROGRAM DIRECTOR: \_\_\_\_\_

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