



**THE UNIVERSITY OF TEXAS AT EL PASO
GRADUATE SCHOOL**

APPLICATION FOR CANDIDACY AND FINAL DEGREE PLAN

Name: _____
Last First Middle

Student Number: _____ E-mail: _____

Address: _____
City, State/ and Zip Code

Doctoral Program/Major: _____ Term of Admission: _____

Title of Dissertation

Attach a brief Description of Dissertation Proposal

APPROVALS AND DATES

Examination Date(s): _____

Dissertation Proposal Defense Date: _____

Official Candidacy Conferral Date: _____ **Expected Term of Graduation:** _____

Dissertation Committee:

	Printed Name	Signature	Date
Supervisor:	_____	_____	_____
Member:	_____	_____	_____
Member:	_____	_____	_____
Member:	_____	_____	_____
Member:	_____	_____	_____
Outside Member:	_____	_____	_____

Candidate's Signature: _____ Date: _____

Graduate Advisor's Signature: _____ Date: _____

College Dean's Signature: _____ Date: _____

Graduate School Dean's Signature: _____ Date: _____

