



## The Graduate College Admission to Doctoral Candidacy

Current Date (mm/dd/yyyy) \* :

First Name \* :

Middle \* :

Last \* :

Student's email \* :

WIN \* :

Degree sought \* :

Current Mailing Address \* :

Street \* :

Phone \* :

City/Town \* :

State \* :

ZIP Code \* :

Date of admission to your doctoral program \* :

Anticipated Date of Graduation \* :

Indicate the following: *Select choices from the Drop-Down List. If you do not see your program or department, TYPE in this information in the space provided*

Graduate Program \* :

Department \* :

College \* :

Title of approved dissertation proposal \* :

Date the dissertation proposal was approved by the student's committee \* :

Does this project require review for research compliance? (HSIRB; DNA; Hazardous Materials; Animals) \*

If **YES**, then the letter of approval from the Office of Research Compliance **MUST BE** attached with this application \*

*\* Dissertations that require approval for data collection from human or animal subjects, radioactive materials or recombinant DNA and that have NOT received prior institutional board approval will not be accepted by the Graduate College.*

The student named above has earned or satisfactorily completed the following requirements for admission to Doctoral Candidacy and has received approval by the academic program unit to continue study toward a doctoral degree: \*

A degree program grade point average of 3.0 or better \*

Appointment of a doctoral dissertation committee and approval of the dissertation proposal by the committee \*

All courses (excluding dissertation credit) and program requirements \*

All research tool requirements \*

Residence Requirement \*

**Comprehensive Examinations** \* : *(Provide precise dates)*

Date the first Exam was TAKEN (mm/dd/yyyy) \* :

Date the last Exam was PASSED (mm/dd/yyyy) \* :



# WESTERN MICHIGAN UNIVERSITY

## The Graduate College Admission to Doctoral Candidacy

### Signatures:

*I hereby apply for admission to doctoral candidacy. I am aware that if my study requires approval to collect data from human or animal subjects, radioactive materials or recombinant DNA that I must secure regulatory approval prior to collecting any data and must submit the approval letter along with this candidacy form. If I am uncertain that my research requires approval, I will contact the Coordinator, Research Compliance for assistance at 269.387.8293. Data collected without approval, when approval is required, will not be accepted by the Graduate College and cannot be used in my dissertation.*

Student's **Signature**

Date \* :

Committee Chair's **Signature**

Date \* :

Committee Chair's Name \* :

Institution \* :

College \* :

Department \* :

Committee Member's **Signature**

Date \* :

Committee Member's Name \* :

Institution \* :

College \* :

Department \* :

Committee Member's **Signature**

Date \* :

Committee Member's Name \* :

Institution \* :

College \* :

Department \* :

Committee Member's **Signature**

Date \* :

Committee Member's Name \* :

Institution \* :

College \* :

Department \* :

**Graduate Dean Signature**

**Date**