Advancement to Candidacy

Form Initiator Role:

Student Information:

First Name: Last Name: Student ID:

Email: Phone:

Degree: Major: Concentration:

(English, Physics, Geoscience, etc.)   *(Geology, Native Arts, etc.)*

Semester   **Year**

Admission Date to Graduate Program:

Semester of completion of Comprehensive Exam:

Advancement to Candidacy

First Name: [   ]   Last Name: [   ]   Student ID: [   ]

UAF 400-LEVEL COURSES - You must earn an A or B grade (no B- or P grades are allowed) in 400 level courses.

Semester	Year	Course Dept.	Course Number	Course Title	# of Credits	GRADE (Letter grade if complete asterisk* if not complete)	Add Another
[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	☐

TRANSFER COURSES - (all other colleges or universities) You may apply post-baccalaureate degree credits (must be equivalent to UAF 400 or 600 level) toward a graduate degree. Up to one-half of all graduate degree credits approved for your program may be transferred from UAA and UAS. No more than one-third of approved program credits may be transferred from other accredited institutions outside the UA system. You must earn a minimum B grade in all graduate courses presented for transfer. Pass/Fail graded courses may not be transferred. Official transcripts must be on file with UAF.

Do you have any Transfer Courses? ___ .

SUMMARY OF PROGRAM CREDITS

Minimum Credits REQUIRED For Degree Program (from catalog):

    Number of your 600-level credits (not including project/thesis/research)

    Number of your 400-level credits (not including deficiency courses)

    Number of Thesis or Project Credits:

        Thesis - Maximum thesis & research credits = 12
          (Do not list more than 12 in your total)

        Project - Maximum project & research credits = 6
          (Do not list more than 6 in your total)

          YOUR TOTAL PROGRAM CREDITS

How many Committee Members are required to sign this form?

Department Chair	First Name:	Last Name:	Email:
College/School Dean	First Name:	Last Name:	Email:
Graduate Coordinator	First Name:	Last Name:	Email:

APPROVED BY GRADUATE COORDINATOR, ADVISORY COMMITTEE MEMBERS, DEPT. CHAIR, DEAN, AND DIRECTOR

Graduate Coordinator Comments: