

PROPOSED DOCTORAL DEGREE PROGRAM
 PART 1 OF 2 PARTS

- NOTE: Work taken before matriculation may not be used in a graduate program without departmental and Graduate College approvals. Transfer work taken after matriculation may not be used without prior permission from the department and Graduate College.
- Please type directly into the highlighted fields or print clearly in blue or black ink.
- Please see your department for Part 2 of the Doctoral Degree Program
- For Part 2, please include ALL courses you completed, are currently in, and propose to take in the future in order to complete your degree.

STUDENT INFORMATION

Student ID (L-Number): _____

Student Name: _____
Last Name First Name M.I.

Address: _____
Street Address

_____ City State ZIP Code

UNLV E-mail Address: _____ Phone: _____

ADVANCED DEGREE PROGRAM INFORMATION

Graduate Catalog year used to determine degree requirements: _____

Department: _____ Concentration: _____

APPROVAL SIGNATURES

(Please sign only after reading and endorsing Part 2 of the PROPOSED DOCTORAL DEGREE PROGRAM)

 Student Date

 Department Chair/Graduate Coordinator Date

 Advisory Committee Chair Date

 *Dean, Academic College Date

 Advisory Committee Member Date

 Advisory Committee Member Date

 Additional Committee Member (if applicable) Date

 Graduate College Representative Date

 Additional Committee Member (if applicable) Date

GRADUATE COLLEGE USE ONLY

 Dean, Graduate College Date

* Please consult the Forms page of the Graduate College website (graduatecollege.unlv.edu) to determine if this signature is required for your program.