

APPLICATION FOR ADVANCEMENT TO CANDIDACY
Specialist Degree

FirstName: LastName: ID#:
 E-mail: Bulletin Year: Degree:
 Address: Major Area:
 City: State: Zip Code: Anticipated Date of Graduation:
 Country: Date:

Must have REGULAR status and have filed application for graduation first!

1. Application for graduation

Link: [GRADUATE GRADUATION APPLICATION](#)

_____ Date of submission

2. PROGRAM REQUIREMENTS (To be filled in by the department)

Required credits:

Minimum 500 & above:

Language:	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Comprehensive:	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>
Teaching Certificate:	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Thesis:	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>
Department Requirement:	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Portfolio	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>
Recital	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	Project(s):	No	<input type="checkbox"/>	1	<input type="checkbox"/> 2

_____ Department Chair/Program Director

_____ Date

3. COURSE REQUIREMENTS: (from attached check sheet)

GRADUATE CREDITS	400-499	> 500	Total
Completed: Transfer	_____	+ _____	_____
AU	_____	+ _____	_____
Proposed: Transfer	_____	+ _____	_____
AU	_____	+ _____	_____
Totals	_____	+ _____	_____

Tour/Workshop: _____ Independent Study: _____ Total: _____

Note: all transfer courses must be approved by petition and an official transcript on file in Records Office.

_____ Academic Advisor

_____ Date

4. GRADUATE SCHOOL

Regular Status: Meets Requirements: Graduate GPA: _____
 Transfer meets requirements: All bulletin requirements met or petitioned:

_____ School of Graduate Studies

_____ Date

5. APPROVAL

_____ Dean, School of Education

_____ Date Granted