

# UC DAVIS

## GRADUATE STUDIES

Receipt #: \_\_\_\_\_  
Filled by Graduate Coordinator

**Candidacy for the Degree of Doctor of**

Philosophy (Ph.D.) |  Education (Ed.D.) |  Engineering (D.Engr.) |  Nursing Practice (DNP) – Plan B

The **\$90 Candidacy Fee** must be paid online at the [GS Forms Store](#) or at the Cashier's Office before this form is submitted to Graduate Studies. *Fee subject to change.*

Candidacy fees support professional development programming available to graduate students through the [GradPathways Institute for Professional Development](#).

Last Name	First Name	Middle Name(s)	Student ID Number	
Student Email	Graduate Program	QE Date (Pass)	Deg. Seq. # (Coordinator)	Program Code (Coordinator)

**Expected term for completion of all requirements, including dissertation (fill in year):**

Spring 20\_\_\_\_ Summer 20\_\_\_\_ Fall 20\_\_\_\_ Winter 20\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Recommended Dissertation Committee

Once approved by the Dean of Graduate Studies, all committee members listed must read and sign the dissertation. A [Reconstitution of Committee Request](#) must be submitted in order to change the committee after approval.

Full Name <small>If including Co-Chairs, please note that next to their names.</small>		Title <small>(Prof, Assoc, etc.)</small>	Home Department	Email Address
Chair				
Optional 4 <sup>th</sup> member (must read and sign dissertation)				
Optional 5 <sup>th</sup> member (must read and sign dissertation)				

### Optional External Member

Is a member of the committee listed above an external member (individual with employment outside the UC system)?  Yes  No

- If yes, an [External Committee Membership Application](#) and the external member's CV must be submitted with the Candidacy.

Name of External Member: \_\_\_\_\_

# UC DAVIS

---

## GRADUATE STUDIES

### Graduate Program Section

Please confirm you have done the following to ensure the student is eligible for candidacy:

- Checked the student's transcript to verify any final required coursework or incomplete grades have been completed, and that the foreign language requirement has been fulfilled (if applicable).
- Viewed the QE Pass Report
- Reviewed the dissertation committee for eligibility, in accordance with [Graduate Council policy](#) & your [program](#) degree requirements

Graduate Program Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Advisor with signing authority)

Print Graduate Program Advisor Name: \_\_\_\_\_

Dissertation Committee Chair Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Dissertation Committee Chair Name: \_\_\_\_\_

Graduate Program Coordinator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Graduate Program Coordinator Name: \_\_\_\_\_

### Designated Emphasis (DE) Section – for students admitted to a DE only

Designated Emphasis in: \_\_\_\_\_

Committee Member who will read the dissertation for the Designated Emphasis:

\_\_\_\_\_

Director of Designated Emphasis Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Director of Designated Emphasis Name: \_\_\_\_\_

\_\_\_\_\_

Second (if applicable) Designated Emphasis in: \_\_\_\_\_

Committee Member who will read the dissertation for the Designated Emphasis:

\_\_\_\_\_

Director of Designated Emphasis Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Director of Designated Emphasis Name: \_\_\_\_\_

### SDSU Ecology Certification (for JDPE students only)

SDSU Dean Signature: \_\_\_\_\_ Date: \_\_\_\_\_

JDPE Program Chair Signature: \_\_\_\_\_ Date: \_\_\_\_\_

JDPE Program Coordinator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Graduate Studies Section

Matriculation: \_\_\_\_\_ Fee Paid: \_\_\_\_\_ Dissertation Filed: \_\_\_\_\_

Full Time: \_\_\_\_\_ Qtrs/Res: \_\_\_\_\_

G.P.A.: \_\_\_\_\_ Registered/Filing Fee: \_\_\_\_\_ Degree Conferred: \_\_\_\_\_  
(at time of Filing)

Deficiencies: \_\_\_\_\_

ETD Number: \_\_\_\_\_ Embargo: \_\_\_\_\_ Copyright:  Yes  No

Dean of Graduate Studies Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Staff Initials: \_\_\_\_\_