



YALE UNIVERSITY

GRADUATE SCHOOL OF ARTS AND SCIENCES

Admission to Candidacy Certification (Combined Program)

Name: _____ Last First	SID: _____ 9 digits, starts with 9, see ID
Department 1: _____	Year of Study (current): _____
Department 2: _____	
Email: _____	Phone: () ____ -- _____

To be completed by the Directors of Graduate Studies (please save before printing):

The student named above has satisfied all Graduate School and any additional departmental pre-dissertation requirements for the degree of Doctor of Philosophy as noted below:

Department 1		Department 2
<input type="checkbox"/>	Course Requirement	<input type="checkbox"/>
<input type="checkbox"/>	Honors Requirement	<input type="checkbox"/>
<input type="checkbox"/>	Language Requirement	<input type="checkbox"/>
<input type="checkbox"/>	Qualifying Examination	<input type="checkbox"/>
<input type="checkbox"/>	Dissertation Prospectus	<input type="checkbox"/>
<input type="checkbox"/>	All additional department requirements	<input type="checkbox"/>

Dissertation Adviser: _____

This individual will have responsibility for reviewing the student's annual Dissertation Progress Report. If there are multiple advisers, please name one adviser who will be responsible for this process.

In recognition of the completion of these requirements the faculty voted on _____ to admit him/her to candidacy for the degree of Ph.D.

Date

Signature of Director of Graduate Studies (Department 1)

Date

Signature of Director of Graduate Studies (Department 2)

Date

Upon completion please email to registrar.gsas@yale.edu or fax to (203) 436-9765