



**YALE UNIVERSITY**  
**GRADUATE SCHOOL OF ARTS AND SCIENCES**  
*Qualifying Examination / Prospectus Certification*

Name: _____ Last First	SID: _____ 9 digits, starts with 9, see ID
Department: _____	Year of Study (current): _____

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

The student named above has fulfilled the following requirement(s) for the Doctor of Philosophy:

The **Qualifying Examination** was completed on: \_\_\_\_\_  
Date

**Check here if the student passed the examination with distinction:**

The **Dissertation Prospectus** was approved on: \_\_\_\_\_  
Date

***N.B. A copy of the prospectus must accompany this form when certifying approval of the prospectus.***

Working Title of the Dissertation: \_\_\_\_\_

Advisor / Committee Chairperson: (Please Print) \_\_\_\_\_

Signature: \_\_\_\_\_  
Director of Graduate Studies Date

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