



YALE UNIVERSITY

GRADUATE SCHOOL OF ARTS AND SCIENCES

Qualifying Examination / Prospectus Certification (Combined Program)

Name: _____ SID: _____
Last First 9 digits, starts with 9, see ID
Department 1: _____ Year of Study (current): _____
Department 2: _____
N.B. A copy of the prospectus must accompany this form when certifying approval of the prospectus.
Working Title of the Dissertation: _____

To be completed by the Director of Graduate Studies (Department 1) (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

Advisor / Committee Chairperson: (Please Print) _____

Signature of Director of Graduate Studies (Department 1) _____ Date

To be completed by the Director of Graduate Studies (Department 2):

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

Advisor / Committee Chairperson: (Please Print) _____

Signature of Director of Graduate Studies (Department 2) _____ Date

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