

DOCTORAL GRADUATE DEGREE CANDIDATE FORM
THIS FORM IS VALID FOR ONE SEMESTER ONLY.

(Print or type) Last Name _____ First _____ Middle _____

E I D _____ Phone _____

Current Mailing Address _____

E-mail address _____

Degree Sought _____ Major _____

Graduation Month: May August December Year: _____

While earning a PhD have you also completed one of UT's doctoral portfolio programs, if so, which one? _____

INSTRUCTIONS:

Submit this form to the University of Texas, Office of Graduate Studies, Main Building 101, Austin, TX 78712 or Campus Mail Code G0400 or fax to 512-475-8851.

Upon submission of this form, your expected degree date will be updated and your name will be entered on the graduation roster. **The Degree Candidate Form is valid for ONE SEMESTER ONLY.**