Advancement to Candidacy

Form Initiator Role: 

Student Information:

First Name: 
Last Name: 
Student ID: 
Email: 
Phone: 
Degree: 
Major: 
Concentration: 

(English, Physics, Geoscience, etc.)
(Geology, Native Arts, etc.)

Semester 
Year 

Admission Date to Graduate Program: 
Semester of completion of Comprehensive Exam: 
Expected Date of Graduation: 

Catalog year you are using: 

You may elect to graduate under the degree requirements in effect and published in the UAF catalog in any one of the previous seven years in which you are enrolled as a master’s degree student. To be considered enrolled in your master’s degree program you must meet the registration requirements per academic year. If you enroll through the nondegree student registration process, you are not considered enrolled as a degree student during that time.

GPA in 600-level courses: Completing by: 

Does your research involve human subjects or animals? 

SUBSTITUTIONS FOR REQUIRED COURSES

Did you make any substitutions for required courses? 

CREDITS REQUIRED FOR DEGREE PROGRAM

UAF 600-LEVEL COURSES - Required program of coursework, research, and thesis credits based on your graduate study plan. In your graduation semester, your transcript will be reviewed to see that all these credits are included. Only list the coursework that will be counted towards your degree program. No more than 12 credits of special topics courses (693 or 695) or individual study (697) may be used toward a graduate degree. Audited courses, 100, 200, 300, 500 level courses are not allowed. Include thesis, project, and research credits.

<table>
<thead>
<tr>
<th>Semester</th>
<th>Year</th>
<th>Course Dept.</th>
<th>Course Number</th>
<th>Course Title</th>
<th># of Credits</th>
<th>Grade</th>
<th>Add Another</th>
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### Advancement to Candidacy

**First Name:** [ ]  
**Last Name:** [ ]  
**Student ID:** [ ]

**UAF 400-LEVEL COURSES** - You must earn an A or B grade (no B- or P grades are allowed) in 400 level courses.

<table>
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<tr>
<th>Semester</th>
<th>Year</th>
<th>Course Dept.</th>
<th>Course Number</th>
<th>Course Title</th>
<th># of Credits</th>
<th>GRADE (Letter grade if complete asterisk* if not complete)</th>
<th>Add Another</th>
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</thead>
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**TRANSFER COURSES** - (all other colleges or universities) You may apply post-baccalaureate degree credits (must be equivalent to UAF 400 or 600 level) toward a graduate degree. Up to one-half of all graduate degree credits approved for your program may be transferred from UAA and UAS. No more than one-third of approved program credits may be transferred from other accredited institutions outside the UA system. You must earn a minimum B grade in all graduate courses presented for transfer. Pass/Fail graded courses may not be transferred. Official transcripts must be on file with UAF.

Do you have any Transfer Courses? [ ]

### SUMMARY OF PROGRAM CREDITS

Minimum Credits REQUIRED For Degree Program (from catalog):

- Number of your 600-level credits (not including project/thesis/research)
- Number of your 400-level credits (not including deficiency courses)
- Number of Thesis or Project Credits:
  - Thesis - Maximum thesis & research credits = 12
    (Do not list more than 12 in your total)
  - Project - Maximum project & research credits = 6
    (Do not list more than 6 in your total)

**YOUR TOTAL PROGRAM CREDITS**

**Initiator Signature**  
**Date**

How many Committee Members are required to sign this form? [ ]

**Department Chair**  
**First Name:** [ ]  
**Last Name:** [ ]  
**Email:** [ ]

**College/School Dean**  
**First Name:** [ ]  
**Last Name:** [ ]  
**Email:** [ ]

**Graduate Coordinator**  
**First Name:** [ ]  
**Last Name:** [ ]  
**Email:** [ ]

**APPROVED BY GRADUATE COORDINATOR, ADVISORY COMMITTEE MEMBERS, DEPT. CHAIR, DEAN, AND DIRECTOR**

**Student Signature**  
**Date**

Graduate Coordinator Comments:
Please list your initials and any notes addressed to the Director about this form.

Graduate Coordinator Signature Date

Committee Chair/Co-Chair Signature Date

Department Chair Signature Date

College/School Dean Signature Date

Graduate School Director Decision:

Graduate School Director Comments:

Graduate School Director Signature Date

Graduate School Processing Comments:

Graduate School Processing Signature Date

Initiator Signature ________________________________ Date: ____________