

Return this form to
Office of Graduate Studies
Mary Reed Building, room 5
2199 S. University Blvd. Denver, CO 80208
Phone 303-871-2706 |Fax 303-871-4942
gradservices@du.edu

Doctoral Advancement to Preliminary Candidacy

Submit during or immediately after the student's first full quarter of doctoral study.

Name:	DU ID Number:
Department/Major:	Degree:
I hereby recommend that the above named student be advanced to prelimit degree on the basis of having met the following requirements.	nary candidacy for the specified
Student has regular status	Completion date:
Transfer of credit, if applicable, has been approved	Completion date:
Student has approved course work plan	Completion date:
Student will complete the following tool/research requirement(s), if a	pplicable:
	Completion date:
	Completion date:
	Completion date:
Student passed departmental qualifying examinations, if applicable	Completion date:
Department Chairperson:	Date:
Associate Provost:	Date: