GRADUATE DIVISION, BOBBY B. LYLE SCHOOL OF ENGINEERING

Southern Methodist University

Admission to Candidacy

Degree	Dep		
Major	SMU	SMU ID	
(Mr.) (Mrs.) (Ms.)	or admission to candida ng (please check or answ er Yes or alternative and date p on: Date passed Date passed	cy for the degree name ver as required): No passedNot requi	d above. Included among redred
6. No. of SMU hrs. completed_8. List other graduate coursework			
Anticipated date of degree (month Statement of any necessary change			
Signatures of faculty adviser or		Names of faculty representatives attending	
members of supervisory committee.*		qualifying examination if different than	
(please type or legibly write name sign on top of or to the right of wr <i>Name</i>		members of superv	visory committee.
Chairman		Name	Field
Department Chair			
Director of the Graduate Division		Date	

Copy (1) of this certificate to be retained by the Graduate Division; (2) to student; (3) to faculty adviser or committee chairman.

^{*} For the doctoral candidate no fewer than five faculty members shall be present for the oral position of the examination but only the official members of the Supervisory Committee are required to sign this form.