PROCESS FOR FILING PROGRAM FORMS FOR MFA, MA/PhD Prelim and Final

TO THE GRADUATE STUDENT: You must submit a University of Minnesota transcript (unofficial, walk-up window version is acceptable) with this degree program form. If you are seeking a transfer of credits from another institution then you must submit official transcripts from those institutions.

TO THE STUDENT AND THE ADVISOR:
You and your advisor should discuss potential faculty members for your committee. Should there be a question of whether the faculty member has appropriate graduate school status that allows them to serve, consult with your advisor, the DGS, or the faculty member in question. Committee members listed below agree by their signature to serve on the committee prior to the submittal of these forms. Please list suggested names in the left column and have faculty members sign in the right column, attesting that they have agreed to serve. **DO NOT PUT COMMITTEE MEMBER NAMES ON THE ACTUAL PROGRAM or THESIS TITLE FORM.**
The DGS will not sign approval of the program without these signatures and the advisor's below.

Student name _____ Committee purpose _____

Major Field Examining Committee:
    (Please print name)   (Signature)

1. _____   _____

2. _____   _____

3. _____   _____
    (PhD committees only)

State academic year of proposed project (MFA) _____

Minor or Related Field Examining Committee Members:
    (Please print **Name** and **Department**)   (Signature)

1. _____   _____

2. _____   _____
    (PhD committees only - option on final thesis committee)

PhD Thesis title/Final Orals only: Indicate with an "R" those committee members above who are Reviewers of the Thesis. The advisor and at least one representative of the major field and one representative of the minor or supporting program must serve as reviewers. Indicate with a "C" who will serve as Chair of the final orals committee. [It may NOT be the Advisor and must be a Full Member of the Graduate Faculty.]

LANGUAGE REQUIREMENT (PhD ONLY):
Please indicate below how you plan to fulfill the PhD language requirement:

_____

_____

SIGNATURE: _____ **DATE:** _____
    (Advisor)

01/00