

UC DAVIS

GRADUATE STUDIES

Candidacy for the Degree of Master of _____(Science or Arts)

Plan I – Thesis Plan

INSTRUCTIONS TO APPLICANT

Please complete both pages, secure appropriate departmental approvals, pay the candidacy fee to the Cashier's Office, and file this form with Graduate Studies. Please consult Graduate Studies and your graduate program for filing deadlines.

NOTE: \$55 Candidacy Fee must be paid at Cashier's Office before this form is presented to Graduate Studies. Fee subject to change without notice.

Last Name		First Name		Middle Name	Student ID Number
Current Address		City		State/Zip Code	Telephone Number
Degree Sequence Number	Graduate Program			Program Code	E-mail

All requirements including thesis to be completed by: (fill in one)

June 20_____ September 20_____ December 20_____ March 20_____

Applicant Signature: _____ Date: _____

Master's Thesis Committee Members: All committee members listed, including an optional fourth reader, once approved by the Dean of Graduate Studies, must approve the final version of the thesis and sign the title page. A change to committee membership requires submission of a *Petition for Reconstitution of Committee Membership* prior to submission of the thesis to Graduate Studies.

Name (First, Middle Initial, Last) _____, Chair	Academic Title (Prof., Assoc. Prof., etc.)	Home Department
(Optional 4 th Committee Member)		

DEPARTMENT APPROVAL

Graduate Advisor Signature: _____ Date: _____

(Advisor with signing authority)

Printed Name: _____

Thesis Chair Signature: _____ Date: _____

Printed Name: _____

Graduate Coordinator Signature: _____ Date: _____

Printed Name: _____

UC DAVIS

GRADUATE STUDIES

LIST ONLY COURSES RELEVANT TO DEGREE

Upper division courses completed or to be completed for the Master's degree (Prefix & number only)	Leave Blank	Units	Quarter and Year taken	Institution	Instructor
Graduate level courses completed or to be completed for the Master's degree (Prefix & number only)					
Graduate Studies use only: TOTAL UNITS LISTED					

GRADUATE STUDIES SECTION

Matriculation: _____ Fee Paid: _____ Thesis Filed: _____

Full Time: _____ Qtrs/Res: _____ Degree Conferred: _____

G.P.A.: _____ Registered/Filing Fee: _____ (at time of submission)

Deficiencies: _____

ETD Number: _____ Embargo: _____ Copyright: Yes No

APPROVED

Dean of Graduate Studies Signature: _____ Date: _____

Staff Initials: _____