

HOWARD UNIVERSITY
Graduate School
Recommendation to Candidacy for the Doctor of Philosophy

Information to be completed (Typed) and submitted to the Office of Educational and Research Affairs

- I.**
- A. Department _____
- B. Candidate's Name in Full _____ I. D. No. _____
- C. Candidate's Present Address (including City, State, Zip Code): _____

email address: _____ Telephone No. _____
- D. Qualifying Examination: Date Passed _____
- E. List the Foreign Language or Other Research Tool Satisfied and Date(s)
(1) _____ (2) _____
- F. Expository Writing Requirement Satisfied (*Attach Certification Copy*) Date: _____
- G. Graduate Record Examination: Date: _____ Scores: Q _____; A _____; V _____
- H. Title of Dissertation (*Attach Proposal*) _____

- I. Approval of Dissertation Proposal _____
Signature: Graduate Program Director (on behalf of the Graduate Faculty)
- J. Institutional Review Board (IRB) Approval Date: _____, N/A _____
- K. Responsible Conduct of Research Workshop Satisfied (*Attach Certificate Copy*) Date: _____

II. Undergraduate Work

- A. Institution _____ B. Degree received: _____ Date: _____

III. Previous Graduate Work

- A. Institution(s) _____
- B. Years in Attendance _____ Degree(s) Received _____ Date(s) _____
- C. Work Beyond the Master's Degree _____

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B. List all courses **currently taking**

CRN-Course No.		Cr. Hrs.

C. List the courses accepted from other degree programs to satisfy Ph.D. Degree requirements:
 (Note: A maximum of **24 credit hours** may be recommended from the Master's Degree)

Course No.	Title	Grade	Semester/Yr. Completed	Credit Hours

D. List all courses taken since entering the doctoral degree program in which the student received a grade below "B". (Include Consortium Courses, if any)

CRN-Course No.	Title	Grade	Semester/Yr. Completed	Cr. Hrs.

VI. Recommendation to Candidacy by Major Department

- Signature _____ Date _____
Major Adviser
- Signature _____ Date _____
Graduate Program Director
(on behalf of the Graduate Faculty)
- Signature _____ Date _____
Department Chairperson (*Only*)

VII. Certification of the Office of Educational and Research Affairs

I certify that the above student has completed all academic requirements and is eligible for admission to candidacy for the Ph.D. degree

Signature _____ Date _____
Emmanuel K. Glakpe
Associate Dean for Educational and
Research Affairs

VIII. Action of the Executive Committee

Admitted to Candidacy by Vote of the Executive Committee

Signature _____ Date _____
Orlando L. Taylor, Ph.D.
Dean