



Qualifying Exam Certification

This form is submitted to Graduate Program Administrator

Student Name: _____ BCM ID #: _____

Graduate Program: _____ Are you in the MD/PhD program? Yes No

PART ONE

The Student and Mentor certify that:

- The student formulated the initial Specific Aims for this proposal.
- This proposal has not been submitted as a fellowship or grant application, by either the student or anyone else.
- The student is the sole author of this proposal
- The proposal is formatted according to NIH rules
- The proposal contains Specific Aims (1 page), a Research Plan (6 pages), References (pages as needed) and an NIH-style Biosketch (5 pages).
- The student has attached a Contributions Statement indicating their contributions to the design and preliminary data of the proposal. They have included the names and contribution of individuals assisting them with the preparation of the proposal
- The student has acknowledged the source of any preliminary data in the proposal that was not generated by them.

Exam Date: _____ Date Proposal Submitted: _____

Student Name: _____ Signature: _____ Date: _____

Mentor Name: _____ Signature: _____ Date: _____

PART TWO

Exam Committee Chair certifies that:

- The complete Exam Proposal has been received by the Exam Committee at least 2 weeks before the date of the Exam.
- The proposal is complete and meets the required format guidelines for the Qualifying Exam.

Exam Chair Name: _____ Signature: _____ Date: _____

Return Completed Form to Graduate Program Administrator