



Request to Apply for a Terminal Master's Degree

(See Article 9.11.1 of the Graduate School Policy Handbook)

This form is submitted to the Graduate School, Room N204

Student Name: _____ BCM ID #: _____

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

GSBS Requirements for the Terminal Master's Degree	
Deadline to complete master's thesis:	
Date for M.S. Thesis presentation & examination by thesis committee:	
Deadline for graduation and payment of fees:	
Program Requirements for the Terminal Master's Degree	
Is a public lecture required? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, the date of the lecture is:	
Other Program Requirements:	

Student Signature: _____
Signature Date

Required Approvals			
	Printed Name	Signature	Date
Thesis Committee Members:			
Major Advisor(s):			
Graduate Program Director:			
Dean, Graduate School of Biomedical Sciences:			

Certification of Eligibility <i>(to be completed by the Graduate School after form is complete with all signatures)</i>	
Matriculation Date: _____ Admission to Candidacy Date: _____ Current Academic Standing: _____	
Graduate School Authorized Signature: _____	Date: _____