

Graduate School

Instructions for Faculty Advisor: Complete Section 1 and either Section 2 or 3 below. Submit the completed form to the dean's office of your school or college.

SECTION 1: STUDENT INFORMATION

Name (Last, First and Middle)	TUId	Anticipated Graduation Date
School or College	Program	Degree

SECTION 2: RECOMMENDATION FOR GRADUATION

I/We hereby certify by signing below that I/we recommend this student for graduation.		
1. Total number of credits required for the program:		
2. Total number of credits completed:		
3. Total number of transfer credits approved and posted by the school/college: Transfer Institution: _____		
4. Total number of credits for waived courses:		
5. Does the student have any "I," "MG," or "NR" grades?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. Has the student completed all required courses for the master's degree?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. Term and year student was admitted to the master's program:		
8. Term and year student <input type="checkbox"/> passed the comprehensive examination <input type="checkbox"/> completed the master's project <input type="checkbox"/> completed the thesis or <input type="checkbox"/> completed "other" _____ :		
9. Has the student completed the degree within the stated time limit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10. If time limit not met, have approved Extension of Time forms been posted to Banner for the student?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11. Has the student met the continuous enrollment requirements?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12. If not continuously enrolled, have approved and paid Leave of Absence forms been posted to Banner for the student?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13. If a thesis is required, date final version was uploaded to ProQuest at http://www.etdadmin.com/cgi-bin/school?siteid=171 :		
Signature of Advisor	Name of Advisor	Date
Signature of Department Chair	Name of Department Chair	Date

SECTION 3: JUSTIFICATION FOR NOT RECOMMENDING STUDENT FOR GRADUATION

Rationale:		
Signature of Advisor	Name of Advisor	Date
Signature of Department Chair	Name of Department Chair	Date