GRADUATE ADVISOR FORM

Name_____________________________ UIID #________

Advisor__________________________

Date of first registration____________

Ph. D. candidacy: date and action________

Comprehensive committee: date formed________

Date materials approved________

Exam date and action________

Names of chair & committee________

Ph.D dissertation prospectus meeting: date and action________

Ph.D dissertation oral examination: date and action________

Area of specialization________________

Secondary area of concentration________

Foreign Language: which________ Satisfied by________

Course distribution requirements: list below the courses satisfying the requirements.

Metaphysics, epistemology (3)________

History (3) Ancient:________

Modern:________

Logic, science & mathematics (2)________

Value Theory (2)________

Seminars (3)________

Secondary area of concentration (+2)________