PhD Qualifying Requirement
Course-based Declaration Form

ECE Graduate Studies Office

Name_ _____ Date _____

University ID Number _____ First semester in current degree program_____

Email Address _____ Telephone _____

☐ One copy of my unofficial transcript is attached. If yes, mark box.

Written Qualifying Exam: Date passed (Month/Year) _____ Score _____

FOUR core courses to declare towards satisfying the PhD Qualifying Requirement:

Course number (e.g. ENEE 600)	Semester taken (e.g. fall 2011)	Grade earned (e.g. A+)

GPA for above listed courses: _____ (must be ≥ 3.50)

By signing here, I certify that all the information given above and attached is complete and accurate.

Student's Signature: _____

_____ Date_____

Advisor Signature Printed Name

DO NOT WRITE BELOW – ADMINISTRATIVE USE ONLY	Yes	No
Student has earned clear pass in written qualifying exam.		
Course grades verified.		
Only one attempt at each course was taken.		
Student passes the qualifying requirement.		

Graduate Director's Approval: _____ Date: _____