

APPLICATION FOR CANDIDACY FOR MASTER OF SCIENCE
IN THE FIELD OF ENTOMOLOGY
(Thesis Plan)

Students must obtain required signatures before filing application. Candidates must be registered or using filing fee in quarter in which the degree is to be awarded.

NAME Mr./Ms. \_\_\_\_\_ SID \_\_\_\_\_
Print Name as It Appears on Official Record (First, Middle, Last)

PRESENT ADDRESS: \_\_\_\_\_

FUTURE ADDRESS: \_\_\_\_\_ as of: \_\_\_\_\_

DEGREES RECEIVED (Dates/Institutions/Locations): \_\_\_\_\_

EXPECTED DEGREE DATE: December 20 \_\_\_\_\_; March 20 \_\_\_\_\_; June 20 \_\_\_\_\_; August/Sept. 20 \_\_\_\_\_

STUDENT SIGNATURE \_\_\_\_\_

By signing this application, I give UCR permission to publish my name and degree information in official campus Commencement publications. [ ] I do not wish to have my name and degree information published in official campus Commencement publications.

Plan I (Thesis) - TITLE OF THESIS \_\_\_\_\_

THESIS COMMITTEE RECOMMENDATIONS (Attach memo of support for Non-Academic Senate members):

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_
(Chair)

Approved for plan and title of thesis: \_\_\_\_\_
Committee Chair

Seminar Requirement (final oral exam):
Indicate date presented or to be presented: \_\_\_\_\_

Presentation of ten minute report at annual conference:
Indicate date presented or to be presented: \_\_\_\_\_

Do Not Write Below This Line

Residence (3qtrs) \_\_\_\_\_ GPA \_\_\_\_\_

Requirements to be Completed
Prior to Degree Conferral:

Table with 4 columns: Course Type, 100, 200, 24, Total, 36. Rows include Courses Required, Completed, in Progress, and To Be Completed.

Oral Defense of Thesis Date: \_\_\_\_\_ ( ) passed ( ) failed
Date Thesis Filed: \_\_\_\_\_
Advancement Date: \_\_\_\_\_

