

**GRAMBLING STATE UNIVERSITY  
SCHOOL OF GRADUATE STUDIES & RESEARCH**

**ADMISSION TO CANDIDACY FORM**

**DEPARTMENT HEAD:** Please complete this form for each student who is pursuing a graduate degree and who has completed 15 hours (30 hours for MSW students) of graduate studies.

Name of Applicant \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

Major Field \_\_\_\_\_ Grade Point Average \_\_\_\_\_

Admission Status: Regular \_\_\_\_\_ Date \_\_\_\_\_ Provisional \_\_\_\_\_ Date \_\_\_\_\_ Conditional \_\_\_\_\_ Date \_\_\_\_\_

Semester Hours of Graduate Work Completed at Grambling State University \_\_\_\_\_

GRE Test: V \_\_\_\_\_ Q \_\_\_\_\_ A \_\_\_\_\_ Total (V+Q) \_\_\_\_\_ Date \_\_\_\_\_

GMAT: V \_\_\_\_\_ Q \_\_\_\_\_ Total \_\_\_\_\_ Date \_\_\_\_\_

English Proficiency Examination: Satisfactory \_\_\_\_\_ Unsatisfactory \_\_\_\_\_

SPA 511: Grade \_\_\_\_\_ Date \_\_\_\_\_

HUM 507: Grade \_\_\_\_\_ Date \_\_\_\_\_

DEED 634: Grade \_\_\_\_\_ Date \_\_\_\_\_

NUR 500: Grade \_\_\_\_\_ Date \_\_\_\_\_

**RECOMMENDATION:**

This student has met all of the requirements for admission to candidacy and is hereby recommended.

**SIGNED:**

\_\_\_\_\_  
Advisor Date Department Head Date

\_\_\_\_\_  
College Dean Date

**CANDIDACY ACTION:**

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_

**REASONS FOR DISAPPROVAL:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signed:**

\_\_\_\_\_  
Graduate Dean Date

**This form must be approved before the student is permitted to register for thesis credit or recommended for graduation.**