

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

Certification of Completion of Degree Requirements

Date _____

Program _____

College _____

**To: Dean
School of Graduate Studies and Research**

_____, (SSN _____)
candidate for the degree of _____ in the
College of _____ will complete all requirements for the said
degree, pending satisfactory completion of this present semester's course of study, presenting for
final approval his/her dissertation, thesis and/or research project, and taking the final oral
examination, as in each case appropriate. The degree will be conferred at Commencement
Exercise on _____.

Copies of the indicated completed required forms which are signed by appropriate
individuals are attached.

- _____ Formal Admission to the Department
- _____ Change from Conditional to Regular Admission status, if appropriate
- _____ Plan of Study
- _____ Request for change in Plan of Study, if needed
- _____ Admission to Candidacy form

Advisor/Major Professor

Date

Coordinator of Graduate Program

Date

Department Head

Date

Dean

Date