QUALIFYING PROCESS COMMITTEE RECOMMENDATION for:

Student: _______________________________  Area: ___________________________  Semester/Year: ____________

Return this form, the members’ Ratings Sheets, the Compiled Qualifying Process Ratings Sheet, and all copies of the qualifying document to the Graduate Coordinator following the oral exam.

- **Option 1:**
  Continuation with recommendation for admission to candidacy when program requirements have been completed.

- **Option 2:**
  Continuation with recommendation for admission to candidacy when requirements AND the following conditions have been successfully completed¹:

  __________________________________________
  __________________________________________
  __________________________________________
  __________________________________________
  __________________________________________

  Deadline*: ______________________________

*If the student is to resubmit his/her document, the deadline must be in two long semesters (although the student & adviser may choose to resubmit it in one semester).

  Student to keep same adviser? __________

- **Option 3:**
  Termination, with approval to complete coursework and requirements necessary for a terminal master's degree.

  Deadline:

  ______________________________

  NOTE: Student may choose to voluntarily terminate doctoral studies prior to the GSC meeting.

- **Option 4:**
  Termination. Student may not register for a future semester.

I recommend this decision:

Qualifying Process Adviser __________________________  Committee Member __________________________  Committee Member __________________________
Committee members complete their individual ratings sheets and then give them to the Qualifying Process Adviser, who uses them to complete this form.

**COMPILED QUALIFYING PROCESS RATINGS SHEET**

<table>
<thead>
<tr>
<th>Qualifying Process Adviser</th>
<th>Committee Member</th>
<th>Committee Member</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME:</td>
<td>NAME:</td>
<td>NAME:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall Qualifying Document</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>Written Exam</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>Oral Exam</td>
<td>______</td>
<td>______</td>
</tr>
</tbody>
</table>

Student’s Name: ___________________________ Area: ___________________________ Semester/Year: ______________