

Name: _____ Date: _____ UTCID: _____

**GRADUATION AUDIT FOR DEGREES AND CERTIFICATES
THE GRADUATE SCHOOL**

Candidacy: formal recognition of graduate students who have completed the majority of their coursework, comprehensive examinations (if applicable), and/or are within one semester of completing their academic program. Each student's Program of Study and Candidacy Application are reviewed by Graduate School staff to determine whether the student meets all University graduation requirements.

Graduation Status Reports and updates will only be sent to a valid UTC E-mail address

Degree:

- Master of Accountancy (MAcc)
- Master of Arts (MA)
- Master of Business Administration (MBA)
- Master of Interior Design (MID)
- Master of Music (MM)
- Master of Public Administration (MPA)
- Master of Science (MS)
- Master of Science in Athletic Training (MSAT)
- Master of Science in Criminal Justice (MSCJ)
- Master of Social Work (MSW)
- Master of Science in Nursing (MSN)
- Master in Education (MEd)
- Specialist in Education (EdS)
- Doctor of Nursing Practice (DNP)
- Doctor of Occupational Therapy (OTD)
- Doctor of Physical Therapy (DPT)
- Doctor of Philosophy (PhD)
- Doctor of Education (EdD)
- Doctor of Computational Engineering (PhD)
- Certificate Program

Program (Major): Use COMPLETE title (example: Secondary Education)

Program (Major): _____ Concentration: _____

Are you completing a thesis? (Y/N)

Certificate Program Title (if applicable): _____

(In the space below, list all courses taken for a certificate program.)

Below list all electives or course changes not listed on the original PROGRAM OF STUDY. Use the Continuation form for additional courses/changes if needed.

Course Prefix & Number	Course Title	Credit Hr	Semester	Grade

Semester/Year in which you plan to graduate: (see the Graduate Academic Calendar for specific dates for submission)

Fall: December 20 ____ Spring: May 20 ____ Summer: 20__

Due last date of spring early registration Due last date of fall early registration Due last date of spring early registration

Student's Signature Date

Major Advisor / Chair Person Date

Program Officer (Director, Coordinator, etc.) Date

Dean, Graduate School Date

SUBMIT completed form to: Graduate School Office, Dept 5305, 103 Race Hall, 615 McCallie Ave., Chattanooga, TN 37403