

DEPARTMENT OF AEROSPACE AND MECHANICAL ENGINEERING

Course Approval for Candidacy Examination

Student: _____
Last Name First Name MI NDID#

Advisor: _____ Co-Advisor: _____
Print Name (If applicable) Print Name

Date of Candidacy Exam: _____

Instructions: Complete this form and submit to Nancy Davis at the time your candidacy exam is scheduled. Descriptions of the course requirements can be found in the Graduate Studies Handbook.

Core Courses (Math I, advanced mathematics, numerical methods)

Course #	Term and Year*	Grade
AME 60611		

Secondary area courses (at least 3):

Course #	Term and Year*	Grade

Major area: _____

Secondary area: _____

Major area courses (at least 6):

Course #	Term and Year*	Grade

Out of department courses (at least 2) †

Course #	Term and Year*	Grade

* Enter planned completion date if not yet taken. Note that any proposed courses listed on this form must be taken prior to graduation, or an amended form must be submitted and approved by the director of graduate studies.

† Courses used to satisfy the core requirements and secondary area of study may be used to satisfy the requirements for out-of-department courses. Out-of-department courses must not be cross-listed as AME courses.

Student: _____ Date: _____
Signature

Advisor: _____ Date: _____
Signature

Co-Advisor: _____ Date: _____
(If applicable) Signature

Approval: _____ Date: _____
Director of Graduate Studies Signature