

Date: _____

Name: _____

Advisor(s): _____

Program: MS Option A (Thesis) ____ MS Option B (Minor) ____ Dual MS/PhD ____ PhD ____

Year in Program (ex. 1, 2, 3, etc.): _____

Anticipated Graduation Date (ex. MS Spring 2025): _____

Post-graduation plans: Academia ____ PhD Program (if applicable) ____ Industry ____ Unsure ____

Were you admitted with any deficiencies? Yes ____ No ____

If "Yes", have they been removed? Yes ____ No ____

Have you formed a committee? Yes ____ No ____

If "Yes" please list your committee members: _____

(Your Supervisory Committee must include a minimum of two Graduate Faculty members from the Statistics department and at least one member from an external department within the UN system. A signature from the Department Graduate Chair is required at the time of filing the [Supervisory Committee form](#). [The Change of Committee form](#) should be submitted to the Graduate Coordinator before assuming any responsibilities.)

Date of last committee meeting: _____

MS Milestones	PhD Milestones
MEMORANDUM OF COURSES <i>Must file prior to completing over ½ of required coursework</i> Submitted: Yes ____ No ____ If "No", number of credits completed: ____	QUALIFYING EXAM Scheduled date: _____ Completed: Yes ____ No ____
COMPREHENSIVE EXAM Scheduled: _____ Option (internship, thesis, 930): _____ Completed: Yes ____ No ____	PROGRAM OF STUDIES <i>Must submit prior to completing 45 credit hours</i> Submitted: Yes ____ No ____
FINAL EXAMINATION REPORT <i>Due at least 4 weeks (3 weeks in summer) prior to Final Oral Examination</i> Submitted: Yes ____ No ____	APPLICATION FOR CANDIDACY <i>Must be submitted at least 7 months before Final Oral Exam</i> Submitted: Yes ____ No ____

Student is making satisfactory progress: Yes ____ No ____

Attached comments (Required if the student is not making satisfactory progress): Yes ____ No ____

SIGNATURES

Student _____ Date _____

Faculty Advisor _____ Date _____