## **DEPAUL UNIVERSITY**

COLLEGE OF EDUCATION

## Candidacy Requirement Course Request Form (A&S/CS/VCE 706)

Registration for (select of	one): $A\&S$	706	CS 706	VCE 706	
Select term: Autumn	Winter	Spring	Summer I	_ Summer II	Year:
Candidate Information	1:				
Name:			DePaul ID#:		
Address:					
Primary Phone:		Secondary Phone:			
Primary Email:		Secondary Email:			
Candidacy Requireme	nt Course Rec	quest:			
1. <b>Must have</b> the disse and complete.	ertation chair/c	apstone advis	or and doctoral j	program assistant	signature to be valid
2. Should be submitted The candidate must courses (SCG 775, 7	have complete	d a minimum			
3. Will be returned to	the candidate is	f incomplete of	or unapproved.		
This section is	to be signed b	y the dissert	ation committe	e chair or capsto	one advisor.
(please pr		is the stude	nt's capstone advi	isor or chair of the	dissertation committee.
Signature of Dissertation Chair/Capstone Advisor			Date		
Other committee members	ers (please prir	nt):			
			-		
			_		
Signature of Doctoral P	rogram Assista	ant			

This form should be submitted to the Doctoral Program Office (COE 319) and your Academic Advisor.