

APPLICATION TO BYPASS THE M.S DEGREE

(This form should be submitted to the SMS Registrar no later than the start of the third year.)

STUDENT: _____ DATE OF ENTRY _____
(Print Name) (Print Semester, Year)

Date: _____ Student's Signature: _____

STUDENT: Attach SMS transcript, CV, statements in items #3 and #4, and PhD prospectus.

ADVISORY COMMITTEE RECOMMENDATION

(SIGNATURES OF ALL ADVISORY COMMITTEE MEMBERS REQUIRED)

This is to certify that all members of the student's Committee (1) recognize [the student's fulfillment of] the requirements to be considered for a bypass of the Master of Science Degree, and (2) are of the opinion that the student has the scholarly potential and has demonstrated a level of excellence in research to proceed directly to the doctorate. Major advisor is to check each of the boxes below to certify that the student has met the stated requirements for the Bypass.

- 1. Approval of the Notification of Intent to Bypass M.S. Degree form.
- 2. A student must be in good academic standing (cumulative GPA of B or better with no core course grade lower than B-).
- 3. Submission of a CV and 1-2 page statement by the student describing the student's achievements and *demonstrated* potential to conduct independent research.
- 4. Submission of a 1-2 page statement by the student's advisor describing the student's achievements and *demonstrated* potential to conduct independent research.
- 5. Recommendation by the student's Advisory Committee to bypass the Master's degree.
- 6. Successful completion of the written comprehensive exam **at the Ph.D. level**.
- 7. Formal acceptance of a **Ph.D.** prospectus by the student's committee.
- 8. Successful completion of the qualifying exam **at the Ph.D. level**.

ADVISORY COMMITTEE

MAJOR ADVISOR OR CO-ADVISOR _____

Next step: Submit this form to SMS Graduate Registrar

ACADEMIC STATUS & DEGREES COMMITTEE RECOMMENDATION

RECOMMEND / DO NOT RECOMMEND (Comments on Reverse Side)

DATE: _____ CHAIR, ACADEMIC STATUS & DEGREES COMMITTEE

ACTION OF THE ASSOCIATE DEAN OF ACADEMIC STUDIES

APPROVED / DENIED (Comments on Reverse Side)

DATE: _____ ASSOCIATE DEAN OF ACADEMIC STUDIES