

UC DAVIS

OFFICE OF GRADUATE STUDIES

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Designated Emphasis Application

Print Student Name: _____ UC Davis Student ID #: _____

Graduate Program: _____

Designated Emphasis: _____

STUDENT CERTIFICATION

I understand that I must remain in good academic standing, assure that there is a Designated Emphasis faculty appointed to both my Qualifying Examination and the Dissertation Committee, and meet all requirements of the Designated Emphasis as well as those of my major program.

Student Signature: _____ Date: _____

GRADUATE PROGRAM ADVISER CERTIFICATION

I certify that the above-named student is in good academic standing (as defined in the *Graduate Adviser's Handbook*), and eligible to participate in the designated emphasis noted on this form.

Graduate Program Adviser Signature: _____ Date: _____

Print Graduate Program Adviser's Name: _____

DESIGNATED EMPHASIS CHAIR CERTIFICATION

I hereby certify that the above-named student was admitted to the Designated Emphasis on:

Date: _____

DE Chair Signature: _____ Date: _____

Print DE Chair's Name: _____

GRADUATE STUDIES SECTION

Verified On: _____ Degree Sequence: _____ Staff Initials: _____

Associate Dean of Graduate Studies Signature: _____ Date: _____