

CHECKLIST FOR DOCTORAL DEGREE REQUIREMENTS
University of Maryland - Department of Aerospace Engineering

STUDENT'S NAME: _____

STUDENT ID#: _____

	Date Satisfied	Advisor's Initials
Doctoral Qualifying Exam	_____	_____
Additional requirements following qualifying exam (if any)	_____	_____
Doctoral Oral Exam	_____	_____
Additional requirements following oral exam (if any)	_____	_____
Approval of Thesis Proposal	_____	_____
Advancement to Candidacy	_____	_____
Dissertation Pre-Defense	_____	_____
Dissertation Defense	_____	_____
Receipt of Final Revised Copy of Dissertation	_____	_____

Original: Department Files
Copy: Student