## Request to Apply for a Terminal Master's Degree

Baylor College of Medicine

Date:

THE GRADUATE SCHOOL OF BIOMEDICAL SCIENCES

BAYLOR COLLEGE OF MEDICINE

(See Article 9.11.1, Graduate School Policy Handbook for guidelines)
Submit to Graduate School N204

Registrar/Graduate Program/GSBS File

Processed by:

Student Name:			BCM ID #:	
Graduate Program: (Are you also in the MD/PhD Program? Yes No)				
<b>CERTIFICATION O</b>	F ELIGIBILITY	(to be complete	d by the Graduate School after form is o	completed with all signatures)
Matriculation Date:	Admission to Candi	dacy Date:	Current Academic S	Standing:
Graduate School Authorized Signature : Date: _				Date:
C	SSBS Requirem	ents for th	e Terminal Master's De	gree
Deadline to complete written master's thesis:				
Date for M.S. thesis presentation and examination by the thesis committee:				
Deadline for graduation and payment of fees				
Program Requirements for the Terminal Master's Degree				
Is a public lecture required?Yes No If yes, the date of the lecture is:				
Other Program Requirements:				
J 1				
Studen	t's Signature:	Date:		
REQUIRED APPROVALS:				
Thesis Committee - Name (Print)			Signature	Date
	Name (Print)		Signature	Date
Major Advisor (s)				
Grad. Pgrm. Director				
Dean of GSBS				
FOR GRADUATE SCHOOL USE ONLY (Revis	sion: 4.7.20)			