NORTHEASTERN STATE UNIVERSITY ADMISSION TO CANDIDACY

DATE:_			
TO:	Graduate College Dean		
FROM:	(Advisor)		
RE:	Student's Name:		-
	Complete Address:		_
	Social Security No.		_
	Program:		
Statemen	ve referenced student has met candidacy red nt of Understanding and Degree Plan for the ve been reviewed.		
1. 2. 3.	Student has met the prerequisite requirement. Student has the minimum grade point average for candidacy. Student has taken the appropriate entrance exam and made the minimum score. (MAT, GRE, GMAT) Other:		
(Advisor	r's Signature)	(Date)	
(Graduate Dean's Signature)		(Date)	

The Graduate College will notify the student when he or she meets candidacy requirements.

FORM: GC 10/2003