

Application Deadlines*
 May Graduation – Nov. 1
 Aug. Graduation – Mar. 1
 Dec. Graduation – June 1

Hampton University – Graduate College

APPLICATION FOR ADMISSION TO CANDIDACY FOR DEGREE COMPLETION

Physics – PhD (Medical Physics Concentration)

Only fully completed forms will be processed when submitted before the application deadline.

I wish to apply for candidacy and graduation. I am applying at least 6 months prior to my expected graduation date, have met all admission requirements, passed the Doctoral Qualifying Examination, completed all core courses, and have a cumulative GPA of 3.0 or higher.

Clearly print your full name as it should appear on the diploma (limit to three names) Student ID Number Telephone Number Email Address

Local Address (Street, City, State, Zip Code) Permanent Address (Street, City, State, Zip); To send diplomas-Dec. and Aug. only

Doctor of Philosophy Degree Hometown (City, State, Country) for Commencement Program

May Aug Dec 20 Expected month and year of graduation (Check one, include year) Previous degrees earned (University, Degree Year)

Use your unofficial transcript (HUNet) to complete the Degree Plan of Study below. Identify the term (Fall=F, Spring=S, Summer=Su) and year for which a course was/will be taken and the grade received. Indicate substitutions in the appropriate column with the course and number. Put a check mark (✓) in the appropriate column if a course is transfer credit or waived.

Degree Plan of Study (2012 catalog – present)		Cr	Term	Grade	Substitute*	Transfer*	Waived*
PHY	601	Mathematical Methods of Physics I	3				
PHY	605	Theoretical Mechanics	3				
PHY	607	Electromagnetic Theory I	3				
PHY	608	Electromagnetic Theory II	3				
PHY	611	Thermodynamics & Statistical Mechanics	3				
PHY	613	Quantum Theory I	3				
PHY	614	Quantum Theory II	3				
PHY	624	Physics of Medicine	3				
PHY	625	Diagnostic Imaging	3				
PHY	626	Nuclear Medicine	3				
PHY	627	Radiation Therapy Physics & Dosimetry	3				
PHY	628	Health Physics – Radiation Protection	3				
PHY	629	Radiation Biology	3				
PHY	630	Clinical Rotation I	4				
PHY	631	Clinical Rotation II	4				
PHY	632	Clinical Rotation III	4				
PHY	633	Clinical Rotation IV	4				
PHY	707	Advanced Nuclear Physics I	3				
PHY	714	Radiation and Detectors	3				
PHY		PHY 719, PHY 735, PHY 736, or PHY 743	3				
PHY	791	Dissertation Research (10 – 15 required)					
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PHY	791	Dissertation Research (10 – 15 required)					
PHY	798	Doctoral Final Oral Comprehensive Exam	1				

*The appropriate forms must be filed and approved to receive credit for course substitutions, transfer credit, and waivers. **Total Credits: ___ Minimum: 76**
 I understand that I may not deviate from this Degree Plan of Study without permission from the Dean of the Graduate College.

Student Signature Date Advisor/Program Coordinator Signature Date

For Official Use Only

Regular Status Achieved: _____	Comments: _____
Cumulative GPA: _____	
Advisory Committee Approved: _____	<input type="checkbox"/> Approved
Dissertation Approved: _____	<input type="checkbox"/> Denied
Qualifying/Comp. Exam: _____ / _____	Dean, Graduate College Signature Date

***Late applications require written explanation to be approved by the Provost.**