

GRADUATE SCHOOL
OF ARTS AND SCIENCES
OF
BRYN MAWR
COLLEGE

APPLICATION FOR CANDIDACY FOR THE DEGREE OF DOCTOR OF PHILOSOPHY	
BIOGRAPHICAL INFORMATION	
Name of Candidate:	ID Number:
Department(s) of Ph.D. degree:	
Fields to be offered for Ph.D. Preliminary Examinations:	Faculty Members setting Ph.D. Examinations (<i>defacto</i> members of the Ph.D. Supervisory Committee)
Other Members of the Ph.D. Supervisory Committee:	
Subject or Title of Proposed Dissertation:	
Faculty Member Directing Dissertation:	
Suggestions for Chair of Ph.D. Supervisory Committee (optional):	
Anticipated date of Preliminary Examinations (month & year):	
<i>I recommend to the Graduate Council that _____ be accepted as a candidate for the degree of Doctor of Philosophy</i>	
<u>SIGNATURES</u>	
Signature of Faculty Member Directing Student's Work:	
Director of Graduate Studies in Department:	Date: