

**CHECKLIST OF REQUIREMENTS FOR THE
MASTER OF ARTS DEGREE
MASTER OF SCIENCE DEGREE
MASTER OF MEDICAL SCIENCE DEGREE
MASTER OF PUBLIC HEALTH**

The University of Texas Graduate School of Biomedical Sciences at Galveston

Matriculation Date: _____

Phase I

Date Completed _____

- | | | |
|----|--|-------|
| A. | Qualifying Examination (if required) | _____ |
| B. | Application for Candidacy Submitted
http://gsbs.utmb.edu/candidacy/ | _____ |
| C. | Application for Candidacy Approved by
Dean (prerequisite to registering for
Thesis) | _____ |

Phase II

- | | | |
|----|---|-------|
| A. | Schedule Appointment with Laura Teed
to obtain final graduation paperwork. | _____ |
|----|---|-------|

Phase III

- | | |
|----|---|
| A. | Submit final unbound copy of Thesis or Electronic Version to Dr. Coppenhaver
for review. |
|----|---|

***MS, MA, MMSC and MPH**

- | | |
|----|---|
| B. | For publication in lieu of Thesis submit: <ol style="list-style-type: none"> 1. Reprint of article or letter
accepting article for publication 2. Signed signature page 3. Copyright disclaimer (signed and dated) 4. Picture |
| C. | If you are binding copies for yourself submit signature pages for Dr.Cooper to sign. |
| D. | Complete Graduate Information Form at : |

<http://www.gsbs.utmb.edu/gsbsforms/gradinfoform.aspx>

Phase IV

- | | |
|----|---|
| A. | Exit interview with Dean (Optional – not required) |
| B. | Clear with Office of Enrollment Services <ol style="list-style-type: none"> 1. Graduation Fee Paid 2. Diploma Name Card 3. Holds on record |