



**Student: Please review and complete the information below.**

**Instructions:** Please fill out one form **per** degree credential. For instance, if you are completing a master's degree and a certificate, you need one form for the master's and one for the certificate.

**Doctoral Students:** When you submit your Announcement of Defense, please attach this fulfillment form AND the Certification form.

Name: (Last, First) \_\_\_\_\_ Student ID #: @00 \_\_\_\_\_

I expect to receive a degree \_\_\_\_\_ (and concentration, if applicable) \_\_\_\_\_ program in \_\_\_\_\_ Semester \_\_\_\_\_ Year \_\_\_\_\_

Current Level:  CR  MS  DMSc  PhD

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_

1. Attach a printout of your unofficial transcript from SURFS or on a separate sheet list all of the UMB courses(including research, independent study, etc.) which will apply toward this degree.

\* If you choose to list your course information on separate sheet, include the following details for each course:

SUBJECT	NUMBER	TITLE	SEM/YEAR	CREDITS	GRADE
PREV	600	<i>Prin. of Epidemiology</i>	Summer 2013	3	B+

I have attached my completed curriculum.

2. List all courses in which you are currently enrolled:

SUBJECT	NUMBER	TITLE	CREDITS
BIO	602	<i>Prin. of Biostatistics</i>	3

3. Number of graduate credits transferred from other universities toward this  N/A \_\_\_\_\_ credits degree: (Official transcripts sent, evaluated and approved in first term.)

SUBJECT	NUMBER	TITLE	CREDITS	GRADE

4. Is this is an MS en route to the PhD?

Yes \_\_\_\_\_ No \_\_\_\_\_

5. Is this a terminal MS in lieu of PhD?

Yes \_\_\_\_\_ No \_\_\_\_\_

\* If yes, forward documentation to Graduate School.



**Faculty Advisor: Please review and complete the information below.**

1. Minimum number of credits required for this degree: \_\_\_\_\_ Credits

2. Number of coursework credits successfully completed at the University of Maryland, Baltimore which will *apply toward this degree*: \_\_\_\_\_ Credits

3. List any course substitutions

**Required Course:**

SUBJECT	NUMBER	TITLE	CREDITS
BIO 1	101	INTRO	3

**Substitution:**

SUBJECT	NUMBER	TITLE	CREDITS
BIO 1	102	BIOLOGY 2	3

4. List waived coursework and number of credits, if any:

SUBJECT	NUMBER	TITLE	CREDITS
BIO	602	Prin. of Biostatistics	3

5. This student has met all requirements for the degree, including any required items below:

- Course requirements
  - Seminars or research papers
  - Written Comprehensive examination
  - Oral Comprehensive examination
- Yes □ No
- Student has met all requirements for concentration? □ Yes □ No □ Not applicable

**The undersigned have reviewed the coursework and credits required for graduation from the above program and certify that this student has completed all program requirements for the degree.**

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Graduate Program Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Graduate Program Director Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

- Master's, Certificate, DMSc Students should submit this signed 'Fulfillment of Course Requirements' form to the School of Graduate Studies by email to [gradforms@umaryland.edu](mailto:gradforms@umaryland.edu).
- Doctoral students should include this form in the Announcement of Defense submission.