



Application for Admission to Doctoral Candidacy Examination (ACE)

At least TWO weeks prior to the date of the oral examination, please submit the following to the Graduate School (e-mail to Denise Jenkins at djenkins@med.cornell.edu) AND the student's Program coordinator:

- 1) This completed form, with Program Director or Chair signature (e-signed PDF, or PDF scan of handwritten copy)
- 2) PDF copy of the final approved written ACE Proposal

Name of Student: _____
Last First Middle

Major Sponsor: _____ WCGS Program: _____

EXAMINING COMMITTEE

Each of the four examiners MUST be a member of the WCGS faculty, except in specific circumstances outlined in "Admission to Doctoral Candidacy Examination (ACE) - Regulations"

1. Examining Committee Chair: _____
Name Program

2. Examiner: _____
Name Program

3. Examiner: _____
Name Program

4. Examiner: _____
Name Program

ADDITIONAL MEMBERS (optional, unless required by Program of Study)

5. _____
Name Program (if WCGS member) or Institution

6. _____
Name Program (if WCGS member) or Institution

Date of Written Examination (or ACE Proposal final submission): _____

Date of Oral Examination: _____ Time: _____ Location/Room: _____

Signature of Program Director or Program Chair: _____ Date: _____

Signature acknowledges that the student and committee satisfy all WCGS rules for the Oral Examination as described in the "Admission to Doctoral Candidacy Examination (ACE) - Regulations"

Graduate School Approval: _____ Date: _____