

NAME:	COUNTRY:
Status Of Degree Work	

Degree Sought _____ Major Field _____

Certification of current status

Date Admitted: _____

Number of courses required for degree: _____

Number of courses completed including this term: _____

Number of years required to complete thesis/dissertation: _____

Expected date of completion of degree: _____

Signature of U of T Graduate Unit

Date (*Month/Day/Year*)

(applicant must arrange for their U of T graduate unit to complete this page)