ADVANCED RESEARCH: MMC 7979
DOCTORAL STUDENTS ONLY

QUALIFYING EXAM PREPARATION

THIS FORM IS REQUIRED FOR REGISTRATION AND MUST BE SUBMITTED TO THE GRADUATE DIVISION BEFORE THE REGISTRATION DEADLINE OR YOU WILL BE RESPONSIBLE FOR LATE FEES.

This form authorizes

Print your name and email address

UF ID Number

to take MMC 7979

Number of credits:

Semester and year of study:

STUDENT: I, the undersigned student, will obtain the required signatures. I will then submit this form and description to the Graduate Division.

Signature of Student

Date Signed

DESCRIPTION OF THE WORK TO BE DONE: Please write a description of the work to be completed this semester in the space below. If additional space is needed, please staple the attachment to this form.

The description is required and must be completed before the instructor and advisor sign this form. The instructor’s signature indicates approval of the description.

--SEE BACK OF PAGE FOR REQUIRED SIGNATURES--
INSTRUCTOR: I, the undersigned instructor, agree to be fully responsible for this graduate student’s study under the general guidelines concerning MMC 7979, as set forth in the Graduate Division’s Doctoral Handbook, Distribution Requirements. I understand that my responsibilities include:

- I have worked out with the student an explicit description of duties for the course, frequency of meetings and how the work will be graded. The one-to-two page description has been stapled to this authorization form.
- I will meet with the student regularly to guide the work throughout the semester.
- I will evaluate the work and assign a grade at the end of the semester. MMC 7979 receives an S/U grade.

Please don't sign until description is included.

<table>
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<tr>
<th>Approval Signature of Instructor</th>
<th>Date Signed</th>
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Please PRINT or TYPE Instructor’s Name  Instructor’s EMAIL Address  Instructor’s Telephone Number

ACADEMIC ADVISER: I, the undersigned academic adviser, have read this form and the attached course description. I find the course as described to be consonant with the student’s academic program.

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<th>Approval Signature of Academic Adviser</th>
<th>Date Signed</th>
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The proposed course meets requirements set out by the Graduate Committee.

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<th>Approval Signature of the Sr. Associate Dean, Division of Graduate Studies and Research</th>
<th>Date Signed</th>
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