THE NATIONAL UNIVERSITY of SINGAPORE APPLICATION FOR PHD QUALIFYING ORAL EXAM

Instructions & Notes:

- This form is to be completed by the student and submitted to the Thesis Advisor(s). Please submit the completed form before the qualifying oral exam.

Section A: To be completed by STUDENT & submitted to Thesis Advisor(s)				
Full Name:		Student ID:		
Funded by:				
NUS-RS TLL Others, please specify:				
Date Admitted: Proposed Title of Ph.D. Thesis:				
Details of Publications (if any): (Give full details of publications i.e. authors, title, name of journals, page/vol. no., year, submitted/accepted for publication, highlight if international journal paper. Attach				
separate sheet if necessary. Copy of publication(s) & letter of acceptance, if applicable, must be enclosed.)				
* To be eligible for the PhD qualifying examination, students must fulfill the following requirements:				
(1) Passed the Written Qualifying exam.				
(2) Completed the first TAC meeting during the first year.				
(3) Three approved level 5000 graduate courses with an average grade of B (GPA of 3.5 and above). (4) Fulfilled a minimum of 36 hours (for the scholarships requirement of 144, e.g SG, SPR; NRFs.) and 104 hours (for scholarship requirement of 416 hours; e.g. international) respectively of part-time teaching if the student is administrated by NUS.				
Section A (cont'd): To be completed by STUDENT & submitted to Thesis Advisor(s)				
Please list down all the courses that you have taken (attach separate sh	eet if necessary):			
Subject Codes/Description	Semester/Year taken	Grade obtained		
Declaration:				
I hereby declare that this QE report is my original work and it has been written by me in its entirety. I have duly acknowledged all the sources of information which have been used in the thesis.				
Student's Signature	Date			

Section B: To be completed by Thesis Advisor(s) & forwarded to Deputy Head for Graduate Studies				
Application for Transfer of Candidature to Ph.D. is	Supported Not Supported			
Comments (attach separate sheet if necessary):				
Thesis Advisor(s)' Name	Signature	Date		
Section C: To be completed by HEAD OF DEPARTMENT				
Ph.D. Qualifying Examination Oral (Tick relevant box)				
Result: Passed Failed				
Application for Transfer of Candidature to Ph.D. is Supported Not Supported				
Comments:				
Deputy Head's Name & Signature		Date		