**Application to Continue Graduate Study toward Ph.D. Degree**Department of Electrical and Computer Engineering, Iowa State University

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| Last Name Click or tap here to enter text. | First Name Click or tap here to enter text. |
| University ID Click or tap here to enter text. | Email Click or tap here to enter text. |
| Will you complete the master’s degree? [ ] No [ ] Yes |
| If yes, indicate when you completed or will complete the master’s degree: |
| Year Click or tap here to enter text. [ ] Fall [ ] Spring [ ] Summer |
| Date of your master’s final oral examination: Click or tap here to enter text. |
| Major professor for your master’s degree: Click or tap here to enter text. |
| Proposed Major for the Ph.D. degree: Choose an item. | Proposed area of specialization Choose an item. |
| **Attachments:** * one-page statement of purpose describing your research interests and the objectives of your doctoral study.
* the [Graduate College form](https://www.grad-college.iastate.edu/student/forms/), “Pursuit of Master’s and Ph.D. in the Same Department”, completed through section I.
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| **Signatures:**  |
| Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_I agree to act as major professor(s) and will be able to provide financial support from grants or contracts that I have for the period indicated below. The support will be as follows:Type of Assistantship: [ ] Teaching [ ] Research [ ] Administrative |
| Hours Per Week: | Term | Monthly Stipend | Account Name or Number |
| Choose an item. | Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. |
| Start Date: Click or tap here to enter text. End Date: Click or tap here to enter text. |
| Major Professor(s) Click or tap here to enter text. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (typed and signed).* submit completed form to ECpE Student Services, 1212 Coover Hall
 |
| DOGE Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Copy: File\_\_\_ Student\_\_\_ Major Professor(s)\_\_\_ form revised 2/2018 |