

Certification of Full-Time Student Status

Who should file: Students who need to be considered full-time and who are registered for a minimum of one credit hour, but fewer than 12 credit hours (or fewer than nine credit hours with a TA, GA or RA position) and whose department verifies they are working full-time on doctoral dissertation research or writing, a final master's project, thesis or comprehensive exam, completing final courses, or an internship related to the student's degree program.

Doctoral Students will be certified full-time until the anticipated degree conferral date on the Application to Candidacy (up to a maximum of seven years from your admission date).

Master's students can be certified for a maximum of two semesters. To apply for an additional semester at the master's level, a written request and progress update from your major advisor must be submitted.

When to file: Prior to the first week of classes for the semester in which the student is to be certified.

Last Name _____ First Name _____

UB Person Number _____ Email _____

Academic Dept. _____ Degree Type: AuD or DNP ___ Master's ___ PhD ___

Reason why full-time status is needed (check all that apply): Loan Deferral ___ Loan Application ___

Immigration Status ___ Tuition Scholarship ___ Other: _____

Semester(s) for which full-time status is needed: Fall ___ Spring ___ Summer ___ Year _____

Major Advisor: Check the appropriate boxes below. Note A and B must correspond to qualify for full-time status.

A. The number of credit hours for which the student will be registered.

B. The number of hours per week the student will be working outside of the classroom on a doctoral dissertation, master's thesis, project, portfolio or comprehensive exam preparation.

A	11 ___	10 ___	9 ___	8 ___	7 ___	6 ___	5 ___	4 ___	3 ___	2 ___	1 ___
B	3 ___	6 ___	9 ___	12 ___	15 ___	18 ___	21 ___	24 ___	27 ___	30 ___	33 ___

Required Attachments

You must submit your original Application to Candidacy with this form (or a photocopy if the original was previously submitted).

Required Approvals

Student _____
Name
Signature
Date

Major Advisor _____
Name
Signature
Date

Chair/Director of Grad. Studies _____
Name
Signature
Date

Submit completed form and attachments to the Graduate School at grad@buffalo.edu or 409 Capen Hall.

For Graduate School Use Only

Reviewer: _____ Approved _____ Denied _____

Comments: _____ Revised 7/23/18