Application for Admission to Doctoral Candidacy Examination (ACE)

At least TWO weeks prior to the date of the oral examination, please submit the following to the Graduate School (e-mail to Denise Jenkins at djenkins@med.cornell.edu) AND the student's Program coordinator:

- 1) This completed form, with Program Director or Chair signature (e-signed PDF, or PDF scan of handwritten copy)
- 2) PDF copy of the final approved written ACE Proposal

ame of Student:	Last	First	Middle
Major Sponsor:			WCGS Program:
AMINING COMMITTEE			
h of the four examiners MUST be toral Candidacy Examination (ACI		nculty, except in spe	ecific circumstances outlined in "Admission
1. Examining Committee Chair:			
		Name	Program
2. Examiner:			
		Name	Program
3. Examiner:			
		Name	Program
4. Examiner:			
		Name	Program
DITIONAL MEMBERS (opti	ional, unless required by Pi	ogram of Study)	
5.			
		Name	Program (if WCGS member) or Institution
6.			
		Name	Program (if WCGS member) or Institution
ate of Written Examination (or A	ACE Proposal final subm	ission):	
ate of Oral Examination:	Time:	Locat	tion/Room:
gnature of Program Directo	or or Drogram Chair		
		all WCGS rules for	Date: the Oral Examination as described in the
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