



**UNIVERSITY OF MARYLAND  
EASTERN SHORE**  
**DIVISION *of* ACADEMIC AFFAIRS**  
**School of Graduate Studies**

**APPLICATION FOR ADMISSION TO CANDIDACY FOR  
THE DOCTOR OF EDUCATION DEGREE**

Directions: Read carefully the specific requirements for the doctoral degree program as set forth in the Graduate School Catalog. Complete this form and have it endorsed by your advisor and the Director of the program in which the degree is offered. Submit the form to the Graduate School. Official transcripts of all prior undergraduate and graduate work must be on file in the Graduate Office before the Graduate School can approve this application.

Date: \_\_\_\_\_

\_\_\_\_\_  
Full Name (Last, First, Middle)

\_\_\_\_\_  
Student's Identification Number

\_\_\_\_\_  
Program Code

\_\_\_\_\_  
Initial Term  
(GS use only)

Degree Program \_\_\_\_\_

To the advisor: By endorsing this application, you are attesting that in the opinion of the student's professors, he or she has satisfied the necessary comprehensive examinations, internship, practicum or clinical affiliation as the program may elect as prerequisites to candidacy. Further, you are attesting that the student has demonstrated the ability to continue graduate study in the chosen field successfully and to pursue the degree. Please print your name and sign below where indicated.

\_\_\_\_\_  
Advisor (Printed Name/ Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Graduate Program Director (Printed Name/ Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean of the Graduate School (Printed Name/ Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
School of Graduate Studies (graduatestudies@umes.edu)

\_\_\_\_\_  
Date

Please direct questions to:

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University of Maryland Eastern Shore  
Engineering and Aviation Sciences Complex, Suite 3046  
Princess Anne, Maryland 21853  
Phone: 410-651-6507  
Fax: 410-651-7571  
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