

Certification of Full-Time Student Status for PhD Students

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 a doctoral practicum, preparation for a doctoral qualifying exam, doctoral research, or dissertation writing. PhD students may be certified full-time through the expected degree conferral term on the PhD Application to Candidacy (up to a maximum of seven years from admission to the program). If the PhD ATC is not yet completed, certification is limited to one semester while working on the PhD qualifying exam/process.

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 Department _____

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

Immigration Status Scholarship/Assistantship 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 practicum, preparation for a doctoral qualifying exam, conducting doctoral research, or dissertation writing.

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: Completed and fully-signed PhD Application to Candidacy, with supporting documents. ____

Or, check here if PhD ATC was previously submitted to the Graduate School. ____

Or, pre-ATC, while working on qualifying paper or exam, indicate expected date / month of examination or completion: _____

Required Approvals

Student _____
Print Name Signature Date

Major Advisor _____
Print Name Signature Date

Chair/Director of Grad. Studies _____
Print Name Signature Date

Submit completed form and attachments to the Graduate School at grad@buffalo.edu.

For Graduate School Use Only

Reviewer: _____ Approved _____ Denied _____

Comments: _____ Revised 1/2024