

## CMBS & Toxi MS Program Pre-Graduation Checklist

**Form Instructions:** Complete this form for a final audit of the fulfillment of the Molecular Medicine Program, GPILS, and Graduate School requirements. Submit this form to the Academic Services Specialist as early in the semester in which you plan to graduate, but **no later than 1 month before to graduating.**

Student Name: \_\_\_\_\_

Mentor: \_\_\_\_\_

<b>Graduate School:</b>	
Application to graduate submitted via SURFS?	
Thesis or Non-Thesis?	
Total number of academic credits, including final semester <i>Minimum 30 credits total.</i>	
Total number of lab rotation credits <i>Check Program Handbook to confirm minimum.</i>	
CIPP 907 Research Ethics completion semester <i>Confirm Academic Specialist has a copy of completion certificate.</i>	
To date, do you have any 'No Marks' on your transcript? <i>Students may not graduate with 'NM' on their transcript.</i>	
Alumni Form completed? <i>Please submit with this completed form.</i>	
CV Submitted? <i>Email the Academic Specialist an electronic copy.</i>	
Have you updated your MedScope profile? medscope.umaryland.edu	
<b>Graduate School Form #1:</b>	
Fulfillment of Course Requirements for MS Degree	
<b>Graduate School Form #2 or #3:</b>	
Certification of MS with/without Thesis <i>Must include a copy of your unofficial transcripts from SURFS.</i>	
Alumni Form completed? <i>Please submit with this completed form.</i>	
Regalia ordered if walking in graduation ceremony?	
<b>Thesis Option - Additional Requirements</b>	
Thesis Bootcamp Dates	
Graduate Research Conference Presentation Date	
Thesis Defense Date	
<b>Graduate School Form #4:</b>	
Report of Examining Committee <i>Grad School Dean's Rep is in charge of this form.</i>	
<b>Graduate School Form #5:</b>	
Approval Sheet <i>Grad School Dean's Rep is in charge of this form.</i>	
Final Thesis submitted to ProQuest ETD	
Final Thesis submitted to Program <i>Email the Academic Specialist an electronic copy. Should be the same as what was submitted to ProQuest ETD.</i>	

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Academic Services Specialist Signature: \_\_\_\_\_ Date: \_\_\_\_\_

