**Pre-Doctoral Internship Readiness Form**

**EDPS 7890**

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

**Advisor:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Dissertation Chair (if different from Advisor):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Courses Completed: YES or NO (circle one)**

If no, what courses are remaining? (Write name of course and when it will be taken below – If course is “incomplete” indicate when it will be completed):

Courses:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Doctoral Committee Organized: YES or NO (circle one)**

If Yes, indicate Dissertation title and members of committee below:

Dissertation Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Committee Members: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Completed and Passed Written and Oral Qualifying Exams: YES or NO (circle one)**

Written (indicate date passed or when you will take): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Orals (indicate date passed or when you will take): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Completed Dissertation Proposal: YES or NO (circle one)**

Indicate date passed or when you will complete: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_