



# Stony Brook University

## *Department of Psychology*

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**Date:**

**To:** Director of Graduate Studies

**RE:** **Advancement to Candidacy for the Ph.D. Degree**

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In accordance with the vote of the \_\_\_\_\_ area faculty, we recommend advancement to candidacy for the Ph.D. for:

\_\_\_\_\_,  
(Student's Name & ID #)

who successfully completed all requirements for advancement on \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Advisor (Print and sign name) Date

\_\_\_\_\_  
Area Director (Print and sign name) Date

\_\_\_\_\_  
Chair (Print and sign name) Date

\_\_\_\_\_  
Graduate Director (Print and sign name) Date