ADVANCEMENT TO THESIS OR DISSERTATION SEGMENT

I. To be completed by student (Please PRINT):

_____ _____ _____
Last Name First Name Panther ID#

Program Level:

☐ Bachelor's ☐ Master's ☐ Doctorate ☐ Other *(Specify)*_____

_____ _____
Email Phone #

II. To be completed by Academic Advisor: The above-named student is in the thesis or dissertation segment of his/her program and is requesting ISSS confirmation of full-time enrollment for required SEVIS periodic reporting. (**NOTE**: ***Students receiving teaching or research assistantships are subject to enrollment requirements as stipulated in their contracts.***) Please complete the following as appropriate:

MASTER'S PROGRAM:

_____ The above-named student has completed all course work and had his/her thesis proposal approved ("Form M2" approved by the University Graduate School (UGS)).

He/She will be enrolled for _____ one (1) OR _____ three (3) credits of Master's Thesis beginning _____ until his/her last semester, which is expected to be_____ for thesis defense.
(Specify semester/year) (Specify semester/year)

_____ The above-named student will defend his/her thesis during the _____ and will register for only one (1)
(Specify semester/year)
Master's Thesis credit. He/She is aware that such a registration is not considered full-time enrollment per UGS rule but will meet immigration requirements for registration ***below hours in the final semester***. **Failure to graduate by the end of the term may jeopardize the student's immigration status and could make him or her ineligible for OPT.**

DOCTORAL PROGRAM:

_____ The above-named student has completed all course work and achieved candidacy (Approved Candidacy at UGS). He/She will be enrolled for three (3) Dissertation credits beginning _____ until his/her last semester which is expected to be _____ for dissertation defense.

_____ The above-named student will defend his/her dissertation during the _____and will register for only one
(Specify semester/year)
(1) Dissertation credit. UGS approval is required. He/She is aware that such a registration is not considered full-time enrollment per UGS rule but will meet immigration requirements for registration ***below hours in the final semester***. **Failure to graduate by the end of the term may jeopardize the student's immigration status and could make him or her ineligible for OPT.**

_____ _____ _____
Advisor's Name (Please PRINT) Advisor's Signature Date

Phone:_____Fax:_____E-mail:_____

UNIVERSITY GRADUATE SCHOOL Verification: _____ _____
Email it to: ugs@fiu.edu Dean or Associate Dean Date

TO STUDENT: Once this form has been signed by your Academic Advisor and UGS, please upload the form to your FIU ISSS Portal (*F-1 Student Services > Advancement to Thesis / Dissertation*).