THE UNIVERSITY OF TEXAS AT ARLINGTON DIAGNOSTIC EVALUATION REPORT

This report must be filed in the Office or Records and Registration by the student's advisor during the student's first year of doctoral program work and no later than the completion of the first 18 hours of course work beyond appropriate master's level coursework or the equivalent.

Name of Student:			
	(Last Name)	(First)	
UT Arlington ID:		,	Date of Evaluation
The evaluation was	Oral		
The above-named student has completed the Diagnostic Evaluation and the following recommendation is made:			
Approval to continue in the doctoral program:			
Approval to continue with specified remedial work:			
(Please notify the Graduate School in writing when the remedial work is complete)			
Failure but permission for reevaluation after a specified period:			
(Specify period of time and	any other conditions)		
Failure and dismissal from the program			
Name (typed)		Signature	Date
Committee Chair			
Committee Member			
W-1			
Committee Member			
Committee Member			
Optimitation Metabel			N 8
Committee Member			
Graduate Advisor			

You may be entitled to know what information The University of Texas at Arlington (UT Arlington) collects concerning you. You may review and have UT Arlington correct this information according to procedures set forth in UTS 139. The law is found in sections 552.021,552.023 and 559.004 of the Texas Government Code.