

**Graduate Group in Epidemiology & Biostatistics  
Doctoral Program in Epidemiology**

**Candidacy Examination Approval Form**

Student Name:

Date of Examination:

This is to certify that the above named student has successfully passed the Candidacy Examination for the PhD in Epidemiology.

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Signature, Chair of Committee

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Print Name

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Signature, Committee Member

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Print Name

*Please submit this form to the Office of Graduate Training in Epidemiology, 926 Blockley Hall.*