



**MARQUETTE  
UNIVERSITY**

Marquette University's Arnold L. Mitchem Dissertation Fellowship Program

**Progress Toward Degree Form**

Please have the Director of Graduate Studies or Academic Dean at your graduate school complete this form.

Name of student \_\_\_\_\_

Student's area of concentration \_\_\_\_\_

Please indicate the specific requirements this student must meet in the doctoral program at your institution. After each item, list the date the requirement was or is expected to be satisfied. *Be sure to include the date the dissertation prospectus was approved.* This form must be received by the Mitchem Fellowship Program by **January 10, 2011.**

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Dean or Director of Graduate Studies (Print)      Signature

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Name of School      Date

Please return to: **Mitchem Dissertation Fellowship Program, c/o William C. Welburn, Senior Advisor to the Provost for Diversity Initiatives, Marquette University, Office of the Provost P.O. Box 1881, Milwaukee, Wisconsin 53201-1881**