

PhD Verification of Completion for OPT

Student completes this section.

USC ID: _____

NAME: _____
Family (last) name **Given (first) name** **Middle initial (optional)**

EMAIL: _____

MAJOR: _____ **POST CODE:** _____

Staff Department Advisor completes this section.

- Continuous Enrollment or Readmission requirements met**
- All units toward degree have been taken**
- All USC & transfer courses applied**
- Time Extensions applied (if needed)**
- Substitutions/waivers applied (if needed)**
- GPA requirement met (≥ 3.0)**
- Qualifying Examination passed & DOC on SIS**
- _____ **Expected date to defend dissertation**
- _____ **Expected date to upload dissertation**

APPROVALS:

STAFF DEPARTMENT ADVISOR (PRINT NAME)

STAFF DEPARTMENT ADVISOR SIGNATURE

DATE