

Filing Fee Petition

STUDENT

Student Name:

Please complete and submit this petition to your program. Prior to submitting this petition, make sure you have completed <u>all</u> degree requirements, except for the official submission of a thesis/ dissertation, or the final formal examination. After your petition has been approved by your program, submit this form to the Graduate Division for approval. Upon approval by the Graduate Dean, the Filing Fee charge will appear on your Student Account. Deadline to submit this petition is two weeks prior to the beginning of instruction for the semester for which approval is sought.

Last Address:	First	Middle	Student ID Number	
Street	City	State Zip	Phone #	
E-mail Address:		Program:		
Degree Objective: M	A □ MS □ MM □ PhD Peti	tion to pay Filing Fee in lieu of registration	n for: Fall Spring Year:	
Currently I have: (check one) Registered for the semester in which I am requesting Filing Fee (must submit cancellation/withdrawal form) Not registered for semester in which filing fee is requested.				
Semester/Year of your Advancement to Candidacy: Fall Spring Year:				
During Filing Fee, I pla	n to: □ Take my doctoral final exa	mination. (Scheduled Date):	☐ File my doctoral dissertation	
(Check all that apply)	□ Take my master's final exa	amination/report. (Scheduled Date):	☐ File my master's thesis	
	☐ Take my comprehensive ex	xamination date. (Scheduled Date):		
Please check the following boxes to verify your eligibility for use of Filing Fee:				
I will have completed all requirements for my degree before the first day of instruction of the term in which I will be on Filing Fee except for planned tasks listed above.				
During the Filing Fee term, I confirm that I will NOT be employed in an Academic Appointment such as Graduate Student Researcher (GSR), Teaching Assistant/Associate/Fellow (TA), Reader or Tutor, or any academic title at UC Merced.				
☐ I was a registered student in the previous term before Filing Fee request.				
Certification by Student: Please read and sign below.				
Before signing below, please be sure that you have checked all boxes above.				
I have (as applicable):				
 Submitted a draft of my thesis/dissertation to my committee. Submitted a draft of my capstone project to my review committee. 				
 Scheduled the date of my comprehensive examination. 				
Scheduled my doctoral final examination/ doctoral defense.				
I have read all pages of this petition and I understand that while on filing status I may not take course, conduct research, earn academic credit, receive a university fellowship, hold a UC appointment or similar academic employment, or make use of University resources and facilities. If I wish to maintain campus housing and/or my GSHIP coverage, I must personally contact those office to make my own arrangements. If I have already received a graduate stipend in the semester on which I will go on Filing Fee Status, I will be billed through my UCM account for the amount I was awarded. I also understand I can only petition for filing fee status once during my entire graduate student tenure at UCM.				
Student Signature: Date:			e:	

PROGRAM

Prior to Completing this Section ensure that the student has completed all degree requirements, except for their official submission of a thesis/dissertation/ final examination. After completing this section, return the form to the student.

	I (Committee Chair) confirm that I have read a draft of the student's dissertation/ thesis and is acceptable with only minor revisions. I am confident the student will graduate at the end of the filing fee term.			
	Thesis/ Doctoral Committee Chair (print and sign) Date			
I (<i>Graduate Advisor</i>) confirm that the student has completed all degree requirements except for officially submitting their thesis/dissertation or completed examination. I am confident the student will graduate at the end of the filing fee term.				
	Graduate Advisor (print and sign) Date			
	Graduate Group Chair (print and sign) Date			
Co	mments:			
IN	International students only: Please obtain approval from UCM's SEVIS/ Visa Coordinator prior to submitting this form to the Graduate Division.			
	Approved			
	Not Approved			
_				
S	EVIS/Visa Coordinator (print and sign) Date			
(Please return to Graduate Division Staff once all signatures have been received and all boxes checked off. ONLY			
L	st Semester student received any funding support at UCM: Fall			
	raduation Application filed with Registrar's Office for:			
Fi	led an Academic Leave Request in the semester prior to requesting Filing Fee Status: No Yes If yes, semester & year:			
	dvancement to Candidacy:			
N	umber of units completed: GPA:			
Pı	ocessed by: Date:			
I	Approved			
I	Not Approved			
	Graduate Division Dean Signature Date			
R	egistrar's Office Use Only:			
Е	ffective Date: Date fees were paid:			
P	rocessed Date: By:			