PhD Qualifying Exam Request Form  
Thermal/Fluids Systems Area  
Walker Department of Mechanical Engineering  
The University of Texas at Austin

Student Name:  
Advisor Name:  
Requested Semester for QE:  
First Semester Enrolled in the ME Graduate Program at UT Austin:  
Student Email:  
Student EID:  
ME Degrees Received:  

BRIEF DESCRIPTION OF THESIS RESEARCH AREA (200 words limit):

PRIORITIZED LIST OF FACULTY TO SERVE ON THE EXAM COMMITTEE (3 preferred and up to 2 alternates):

1.  
2.  
3.  
4.  
5.  

Use an asterisk (*) to indicate which, if any, are not members of the ME GSC.

COURSEWORK CURRENTLY TAKING AND/OR COMPLETED (use an asterisk (*) to indicate which three courses you want to be considered as your core courses):

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Name</th>
<th>Grade</th>
<th>Course #</th>
<th>Course Name</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

__________________________________________________________________________________________

Student Signature  
Date  
Advisor Signature  
Date

Revised 09/29/2023