AMS Application

DATE: _______________________

NAME: ______________________________________ EMAIL: __________________________

DEPARTMENT: ___________________________ EXPECTED GRADUATION: ________________

AMS ADVISOR: ______________________________________

A. GENERAL HISTORICAL REQUIREMENT
   I plan to satisfy this requirement with the following two courses, or with courses in similar topics:
   1. __________________________________________________________
   2. __________________________________________________________

B. DISCIPLINARY REQUIREMENT
   I plan to satisfy this requirement with the following two courses, or with courses in similar topics:
   1. __________________________________________________________
   2. __________________________________________________________

C. ANCIENT MEDITERRANEAN LANGUAGE REQUIREMENT
   I have had or will receive three combined years of college-level instruction in an ancient Mediterranean language. Note that this requirement can be fulfilled by multiple years of instruction in the same language. For requirements you have completed at another university, please supply a transcript and course syllabus/description
   Year 1. __________________________________________________________
   Year 2. __________________________________________________________
   Year 3. __________________________________________________________

D. I will attend the AMS seminar series for at least 3 quarters, and will present at least 1 paper.
E. I will complete a Ph.D. dissertation that is focused on an issue appropriate to AMS.
Signatures:  ___________________________________________  ________________________
Student  ___________________________________________  ________________________
_________________________________________  ________________________
AMS Advisor  ___________________________________________  ________________________
_________________________________________  ________________________
Home Department Faculty Advisor  ___________________________________________

Date approved by AMS Committee: ____________________________

Signature of Chair of AMS: ____________________________

Comments: