



**MARQUETTE  
UNIVERSITY**

**ARNOLD L. MITCHEM DISSERTATION FELLOWSHIP PROGRAM**

**Progress Toward Degree Form**

Please have either the Director of Graduate Studies or an Academic Dean at your graduate college or 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 **Tuesday, April 15, 2025.**

\_\_\_\_\_  
Dean or Director of Graduate Studies (Print)      Signature

\_\_\_\_\_  
Name of Institution      Date

Please email to [mitchem.fellowship@marquette.edu](mailto:mitchem.fellowship@marquette.edu) or send by mail to:  
**Mitchem Dissertation Fellowship Program**  
**c/o Christine Navia PhD, Acting Vice President of Belonging and Student Affairs**  
**Division of Belonging and Student Affairs**  
**Marquette University, AMU 437**  
**P.O. Box 1881**  
**Milwaukee, Wisconsin 53201-1881**