Millersville University

COLLEGE OF GRADUATE
STUDIES AND ADULT LEARNING

APPLICATION FOR GRADUATION

Please complete this form, obtain adviser and graduate coordinator signatures, and return it to the College of Graduate Studies and Adult Learning on or before the date indicated on the graduate calendar for the term you plan to graduate. This information will be used to order your diploma and for printing the commencement program; the form, therefore, must be completed fully and accurately. Please be aware that submission of the application will prompt the \$30 degree/transcript fee to be assessed to your student account on MAX and must be paid prior to the release of your final transcripts and diploma.

MU ID#			MU ID#	
Current Mailing Address	(this is the address your di	ploma will be ma	ailed to):	
Street	City/State	Zip	Phone No.	
E-mail Address (this will be used	to send Commencement information	n)		
Expected Completion of Degree Requirements: (check one) Winter (January) Spring (May) Summer I Summer II Fall (December) Program requirements in progress (including courses, research, exams,			Degree: M.A. M.Ed. M.S. M.S.N M.S.W. E.D.S E.D.D D.N.P. D.S.W Major:	
		I am completing: □ Dissertation □ Thesis □ Research		
			□ Project □ Non-research Option	
internship, etc.):		Nar 	Name of Research Adviser, if applicable:	
		Title	of Dissertation or Thesis, if applicable:	
concluding academic year.	ement ceremony is held in May for all		ompleted their program in the summer-spring terms of the	
remaining as of the prior May co	mmencement, you are eligible for exc im requesting this exception to par	ception to walk in that	ximum of 3 credits (not including a thesis or internship) ceremony in consultation with your program coordinator. eremony prior to completion of	
Signature of Student			Date	
Signature of Program Adv	isor		Date	
Signature of Graduate Coordinator			Date	

Application entered into Banner: _____ C:___ A:___ E:___ GPA: ___