SLIPPERY ROCK UNIVERSITY

GRADUATE APPLICATION FOR GRADUATION AND INCLUSION IN COMMENCEMENT PROGRAM

I.
NAME_____
First *Middle* *Last*

***Print name *exactly* as you wish it to appear on your diploma and the commencement program.**
***If your name has changed since matriculation, you must file a name change form in the Office of Academic Records.**

ADDRESS for commencement program: _____
City *State* *Country*

CURRENT ADDRESS_____
Street *City* *State* *Zip Code*

PHONE NUMBER _____ Student Rock I.D. No. A0_____

ADDRESS for mailing diploma after graduation (if different):

_____
Street *City* *State* *Zip Code*

II. DEGREE: D.P.T. ____ M.A.____ M.Ed.____ M.S. ____ OPTION: Non-Thesis _____ Thesis _____

GRADUATE PROGRAM: _____ DEPARTMENT: _____

_____ _____ _____
Undergraduate College/University Undergraduate Degree Earned (i.e., B.A., B.S., B.S.Ed., etc.) Year of Undergraduate Degree

III. I plan to graduate: Summer _____ December _____ January _____ May _____ of _____
Year

NOTE: If you are graduating in summer & wish to walk through the May ceremony, you must complete a "walk through" form which is available in the Office of Academic Records & Summer School, (107 Old Main) or the Commencement Office (Rm. 201 Old Main).

IV. Are you completing a thesis or research paper?_____

If yes, please go to the Graduate Admissions Forms page and complete the Thesis/Research paper form and follow the instructions.

DIPLOMAS: Diplomas are mailed to students approximately 4 weeks after final grades are submitted whether or not they attend commencement.

TRANSCRIPTS: A complimentary transcript, indicating degree and date of conferral, will be forwarded to you from the Office of Academic Records and Summer School with your diploma.

CERTIFICATION: Students who have completed the prescribed requirements for certification in Reading, School Counseling, Environmental Education, Secondary Education, Supervision, or Mentally and Physically Handicapped must file an application for certification with the Dean of the College of Education.

_____ _____
Student's Signature Date