APPLICATION AND APPROVAL FOR GRADUATION IN GRADUATE STUDIES

LANDER UNIVERSITY

Please print all entries. Attach an unofficial transcript, printed from Bearcat Web and Academic Program Record to this form.

NAME _____

Print name in full for diploma usage. (The name submitted should be your legal name as determined by the Office of Admissions upon enrollment at Lander University for your graduate degree. If you have changed your name since enrolling, please review the procedures for a name change on the Registrar's Office website.

PERMANENT ADDRESS _____ STUDENT ID# _____

PREFERRED FIRST NAME _____

EMAIL ADDR _____ HOMETOWN / CITY _____

****

SEMESTER OF GRADUATION _____ **CATALOG YEAR** _____ ----- _____

DEGREE _____ **MAJOR** _____

****

COURSEWORK ENROLLED DURING LAST TWO SEMESTERS:

Discipline	Number	Credit	Discipline	Number	Credit

EXIT REQUIREMENT: _____

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Student's Signature	Date	Director of Graduate Studies	Date
University Bookstore	Date	Dean, College of Education	Date
Academic Advisor	Date	Office of the Registrar	Date

COMMENTS: _____

_____

NOTE: If a student's graduation plans change, academically or personally, the student must contact the Registrar's Office by the third week of the graduation semester. Failure to notify the Registrar's Office results in the payment of a diploma replacement fee upon reapplication.

COPIES: Permanent File, Student

Revised: August 2006