APPLICATION FOR GRADUATION

Graduate and Professional Candidates Only

NCCU ● OFFICE OF THE UNIVERSITY REGISTRAR ● 1801 FAYETTEVILLE STREET ● DURHAM NC 27707

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 🞎 Summer, 2016 |  | 🞎 December, 2016 |  | 🞎 May, 2017 |

This form and the **Academic Approval for Graduation Form** are **due** in the Registrar’s Office by June 10 for summer 2016 completion, **by October 1** for December 2016 graduation, and by February 11 for May 2017 graduation. After the data from this form has been entered into the system, your account will be charged with a **DIPLOMA FEE** of **$12.00 for graduate and law students**. If you apply and do not graduate at the end of this term, you must apply again during the semester in which you expect to finish. The diploma fee is added to your account each time you apply. Please note that students who check summer graduation will not receive their diplomas until the December commencement. **You must also obtain clearance from, Student Accounting, and Scholarships and Student Aid by the Monday before Commencement. Please direct all inquiries regarding invitations and caps and gowns to the University Bookstore.**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| STUDENT ID NUMBER | **8** | **2** | **0** | **–** |  |  | **–** |  |  |  |  |

|  |  |
| --- | --- |
| NAME (Please **PRINT**) |  |
|  |  **Please PRINT your name exactly as it should appear on your diploma.** |
| PERMANENT ADDRESS |  |
|  | NUMBER AND STREET |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | CITY | STATE | ZIP |
|  | ( ) |  |
|  | (AREA CODE) TELEPHONE NUMBER | CAMPUS E-MAIL ADDRESS |

|  |  |  |  |
| --- | --- | --- | --- |
| GRADUATION TERM | December May Summer |  |  Is this your 1st graduate/professional degree? YES NO |
|  |  | (YEAR) |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| COLLEGE/SCHOOL (check one) |  Arts & Sciences |  Behavioral & Soc Sci | Business | Education |
|  | Law | LSIS |  |

DEGREE FOR WHICH YOU ARE APPLYING: (check one below)

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Graduate & Professional | MA | MS  | MBA | MAT  | MED | MIS | MLS | MMU | MPA | MSA |
|  | MSW | JD |  |  |  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| MAJOR |  | CONCENTRATION |  | MINOR |

|  |  |
| --- | --- |
| Have you applied for graduation before? YES NO If yes, please indicate what semester: |  |

IF YOU ARE APPLYING FOR A DEGREE IN MORE THAN ONE MAJOR, PLEASE SUBMIT INFORMATION ON THE SECOND MAJOR BELOW **AND COMPLETE A SEPARATE APPLICATION FOR THE SECOND MAJOR**.

|  |  |
| --- | --- |
| 2ND MAJOR (or joint degree) |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| GRADUATE SCHOOL DEAN (PLEASE PRINT) |  | GRADUATE SCHOOL DEAN’S SIGNATURE |  | TELEPHONE NUMBER |
|  |  |  |  |  |
| ACADEMIC DEAN (PLEASE PRINT) |  | ACADEMIC DEAN’S SIGNATURE |  | TELEPHONE NUMBER |
|  |  |  |  |  |
| DEPT. CHAIR (PLEASE PRINT) |  | DEPT. CHAIR’S SIGNATURE |  | TELEPHONE NUMBER |
|  |  |  |  |  |
| ADVISOR (PLEASE PRINT) |  | ADVISOR’S SIGNATURE |  | TELEPHONE NUMBER |
|  |  |  |  |  |
| APPLICANT’S SIGNATURE |  |  |  | DATE SUBMITTED |

Revised 8-14-2014