JUDSON UNIVERSITY

APPLICATION FOR GRADUATION
GRADUATE PROGRAMS

ID# ___ ___ ___ ___ ___ ___ DEGREE :_____

NOTE: Applications are due 12 months prior to the planned date of degree conferral. Complete this form, have it approved by your advisor and return it to the Registrar's Office along with a copy of your degree audit noting your plan for completing each requirement that is incomplete.

NAME: PRINT your legal name below - THIS WILL BE HOW YOUR NAME WILL APPEAR ON YOUR DIPLOMA

_____ _____ _____
First Middle Last

Pronunciation of name if unusual _____

Personal Email Address: _____

Home/Commuter Address: _____City, State, ZIP _____

Home/Cell Phone: _____ Work Phone:_____

ANTICIPATED GRADUATION DATE ☐ Fall* ☐ Spring Year 20 ___ ___

***If graduation requirements are complete in June, the degree can be conferred with a June date with participation in the following December ceremony. Please check this box for June conferral:** ☐

***If graduation requirements are complete by August 1st, the degree can be conferred as of August 31st with participation in the following December ceremony. Please check this box for August conferral:** ☐

DO YOU PLAN TO PARTICIPATE IN THE COMMENCEMENT CEREMONY? ☐ Yes ☐ No
You will order your cap & gown online during the semester you plan to graduate. Keep checking your Judson email and the commencement website for information on ordering.

ARE YOU RELATED TO ANY JUDSON ALUMNI? ☐ Yes ☐ No
If yes, please list their names and relationship to you_____

YOUR ACADEMIC ADVISOR MUST REVIEW AND APPROVE YOUR PLANNED COURSEWORK.

Applicant's Acknowledgement:
I understand that it is my responsibility to complete requirements and to verify that my course registration each term matches the approved plan. If this application is not filled out completely I am aware it will be returned to me for completion. I understand that my academic requirements must be completed and my account must be cleared before Commencement, and that I will be charged the graduation fee regardless of whether or not I participate in the ceremony.

_____ Date ___/___/_____
Applicant's Signature

_____
Advisor's Signature