

## GRADUATE STUDENT: APPLICATION FOR GRADUATION

Complete this form in consultation with the graduate advisor supervising the degree program. The advisor's signature is required and a copy of the plan of study (Graduate Advising Program Planning form) must be attached to this form. An updated (GAPP) form can be obtained from the graduate advisor. **Students enrolled in programs leading to teacher certification must have this form stamped by the Education Licensure Office (ED 203).** *No applications will be accepted by the Graduate School without these approvals.* It is the responsibility of the student to remove any and all deficiencies during the term of application. **Application deadlines are as follows: spring, Feb 25<sup>th</sup>, and summer, Jun 21<sup>st</sup>.**

*If for any reason the requirements for the degree are not completed in the term applied, it will be necessary to re-file by the deadline of the term that the deficiencies are met. No payment is required, except in the case of increased fees.*

*The deadline for filing is published each term in the CSU Class Schedule Bulletin. A \$50 nonrefundable-processing fee is required. Students may pay by check or money order in the Graduate Admissions (ADM, 126) or with cash or credit at the cashier's window, Cook Administration Building, 2<sup>nd</sup> floor. There is an additional fee for students who wish to participate in the university's commencement exercise, normally held at the end of the fall & spring terms.*

Term Completing: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer Year _____					
First Name:		Middle Name:		Last Name:	
Student ID #:		Day Phone:		Eve. Phone:	
Street Address					
City, State, Zip Code					
<b>Check the degree you expect to receive:</b>					
<input type="checkbox"/> Master of Arts (MA) <input type="checkbox"/> Master of Arts in Teaching (MAT) <input type="checkbox"/> Master of Science in Education (MSED) <input type="checkbox"/> Master of Fine Arts (MFA) <input type="checkbox"/> Master of Public Health (MPH) <input type="checkbox"/> Master of Nursing (MSN)			<input type="checkbox"/> Master of Science (MS) <input type="checkbox"/> Master of Social Work (MSW) <input type="checkbox"/> Master of Occupational Therapy (MOT) <input type="checkbox"/> Ed.D. in Educational Leadership (EDDL) <input type="checkbox"/> Graduate Certificate		
Name to appear on diploma: <b>TYPE</b> your <b>LEGAL NAME OF RECORD</b> , as shown on all official university documents.					
Program			Concentration (if applicable)		
Number of Hours Completed in Major _____ Hours to be Completed _____ Cumulative G.P.A _____					
Did you complete a special (student) teaching experience? <input type="checkbox"/> Yes <input type="checkbox"/> No Date of Completion? _____					
Have you passed the comprehensive exam?		<input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, when? _____	
Have you completed a thesis? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, title ▶ _____			

**By signing you acknowledge that you have read and understand all of the above information.**

Student's Signature	Date
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**Recommended by:**

**Approved by:**

Graduate Advisor (required) \_\_\_\_\_ Date \_\_\_\_\_

Dean of Graduate School \_\_\_\_\_ Date \_\_\_\_\_

\*Education Licensure \_\_\_\_\_ Date \_\_\_\_\_

<b>Graduate School Office Use</b> Amount Paid: _____ Processing Receipt No. _____ Re-filer: <input type="checkbox"/> Yes <input type="checkbox"/> No
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\*All students completing a program in either: School Counseling, School Social Work, Reading, Library Science, General Administration, Special Education and Superintendent Endorsement must have this form stamped by the Education Licensure Office (ED 203) PRIOR to submitting to the Graduate School. Non-stamped forms will be returned.