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|----------------|-----------|---|-------------------------------------|
| Student Number | Last Name | First Name | Middle Name |
| Home Address | | | Area Code and Home Telephone Number |
| City | State | Zip/Postal Code | Nation |
| E-Mail Address | | <input type="checkbox"/> Home <input type="checkbox"/> Work | |

This application should be filed with your academic advisor during your last year of study, as soon as you can determine with reasonable certainty in which quarter you will complete all requirements for your degree. It is recommended that it be filed no later than the beginning of the quarter prior to your last quarter. **To participate or be listed in June Commencement activities in any way, it must be filed no later than March 1.**

PROPOSED GRADUATION DATE: Quarter _____ Year _____

Enter the quarter in which you will complete all requirements for your degree. You must complete all requirements by the last day of that quarter in order to be eligible to graduate that quarter. Attendance at Commencement in June is not the same as graduation; ask your advisor or the Registrar's Office for details.

SCHOOL: School of Mission and Theology School of Psychology & Marriage and Family Therapy

DEGREE: _____ **CONCENTRATION** (if relevant): _____

YOUR NAME EXACTLY AS IT IS TO APPEAR ON YOUR DIPLOMA: _____

Please type or print clearly. Do not use all upper case letters; names will appear in mixed upper and lower case. We cannot print nicknames, titles, degree names (e.g. Ph.D., M.D., etc.) as a part of the name line on the diploma. We cannot print names that are significantly different from your legal name as entered in our records. Your name will also appear in the Commencement program as you provide it here.

DIPLOMA: Please provide a reliable address as your mailing address for your diploma (typically 8-10 weeks or more after the end of the quarter):

| | | | |
|---------|-------|-----------------|--------------------------------|
| Address | | | Area Code and Telephone Number |
| City | State | Zip/Postal Code | Nation |

What kind of address is this? Home Business/Church/Mission "Permanent" forwarding address (relative or friend)

COMMENCEMENT: Please indicate whether or not you are planning to attend Commencement exercises *in Pasadena* in June of the current academic year. (Note: Arrangements for any Regional Campus Commencement will be handled through your Regional Campus office.)

- | | |
|--|---|
| <input type="checkbox"/> I plan to attend <i>in Pasadena</i> | <input type="checkbox"/> I have already attended <i>in Pasadena</i> for this degree |
| <input type="checkbox"/> I do <u>not</u> plan to attend <i>in Pasadena</i> | <input type="checkbox"/> I plan to attend a Regional Commencement on _____ campus |

If your proposed graduation date is the end of **Summer** Quarter, and you are requesting permission to participate in any June Commencement activities **preceding** this date, a signed copy of the *June Commencement Prior To Summer Graduation* policy must be submitted with this Application. Please initial to indicate that you have received a copy of the Summer Grad Policy and understand its provisions: _____ (Initials)

REGALIA INFORMATION (please supply this information, particularly your height, even if you are not planning to attend)

HEIGHT: _____ **HAT/CAP SIZE if known:** _____ **SHIRT/BLOUSE SIZE:** _____

YOUR HOMETOWN should be listed as: _____
 City State Nation (if not United States)

This Application for Graduation is being filed on the basis of reasonable certainty that all degree requirements will be completed by the end of the quarter indicated above. I understand that failure to complete the degree requirements by the end of the quarter indicated above for any reason (including taking an Incomplete in a class) cancels this application, and that I must submit a new Application for Graduation.

Signature of Student _____ Date _____

Signature of Advisor _____ Date _____