McMURRY UNIVERSITY

Application for Graduation

Office of the Registrar

Date: _____ Student ID: _____

Full Legal Name: _____

Local Address: Permanent Address:

_____ _____

_____ _____

Cell Phone _____ Advisor: _____

What term do you plan to complete all degree requirements? (check one):

August ☐ December ☐ May ☐ Year: _____

- *December graduates participate in the subsequent May commencement ceremony.*
- *August graduates participate in the preceding May commencement ceremony if summer registration has been completed for all remaining requirements.*

Degree (check one): **BA** ☐ **BFA** ☐ **BS** ☐ **BBA** ☐ **BIS** ☐ **BME** ☐ **BSN** ☐ **MACC** ☐ **MSN** ☐

Catalog under which you are graduating: _____

(This is the year of your first term of enrollment at McMurry or a subsequent year up to 6 years.)

Major: _____

Minor: _____

Concentrations / Endorsement / Teaching Field: (if applicable for your degree)

_____

Principal Instrument (for music majors/minors): _____

I understand that a full GRADUATION AUDIT LETTER will be sent to my McMurry email and to my advisor prior to the opening date of registration of my expected last term of enrollment. It is my responsibility to check my McMurry email account on a regular basis and to communicate with the Registrar concerning any questions or changes with my degree.

Student Signature: _____

Updated 07.2017