Graduate Student Application for Graduation

School/College of _____

Instructions: This form must be completed in order to graduate. Please fill in all required items with the assistance of your Department. A program check sheet must accompany this request when submitted to the Records Office.

1) Name: _____ La Sierra ID: _____
   Print or type your *full legal name* as it is to appear on your diploma.
   NOTE: A data correction form is required for any name change.

2) Degree: ☐ MA ☐ MAT ☐ MEd ☐ EdS ☐ EdD
   ☐ MBA ☐ MS ☐ MTS ☐ MDiv Department: _____

3) Major(s): _____

4) Current address: (This is the address where we will mail your diploma; diplomas are processed starting 45 days after the end of the term)
   _____
   _____
   NOTE: Pick up & domestic mailing included with graduation fee; International mailing = $100 FedEx charge

   Hold for pick up ☐ (If this box is checked we will notify you when it can be picked up)

5) La Sierra email address (Required for all official communication): _____@lasierra.edu

6) Current phone number: _____

7) Please list all requirements (courses/exams) lacking in order to complete degree:

   Requirement _____ Quarter _____

   Requirement _____ Quarter _____

   Requirement _____ Quarter _____

   Requirement _____ Quarter _____

In which term will your final requirement be completed? _____ Quarter _____ Year

Do you plan to attend the June graduation ceremonies? Yes ☐ No ☐

_____ Signature of Student _____ Date

_____ Signature of Dean or Dean's Designee (e.g., Chair) _____ Date

_____ Approval of Graduate Committee (if required) _____ Date

For Records Office use only:

Measurements for regalia: Height _____ft _____in Check for XL gown ☐ *(Note: gowns run small)*