

**College of Health Professions
Marshall University
Graduation Application**

Applications must be completed during the graduation/senior evaluation. A diploma fee of **\$50 for a bachelor's degree or \$50 for an associate degree** must be paid in the Bursar's Office and a receipt for payment provided to Dean Crawford in PH 221 by the University graduation application deadline..

DEGREE YOU EXPECT TO RECEIVE	MAJOR	I plan to graduate in <input type="checkbox"/> May <input type="checkbox"/> December <input type="checkbox"/> July <input type="checkbox"/> August	
NAME:		ID#:	
ADDRESS:			
CITY:	STATE:	ZIP:	PHONE#:
EMAIL ADDRESS:			
Is this your first bachelor's degree? <input type="checkbox"/> Yes <input type="checkbox"/> No		Is this your first associate's degree? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have any incomplete grades outstanding? <input type="checkbox"/> Yes <input type="checkbox"/> No NOTE: Incomplete grades are changed to "F" after one semester.		Alumni Contact Form Attached ___Yes ___No	
Do you expect to graduate with a minor? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which field:			
List all other colleges attended (Note that all non-Marshall work must be on your official record prior to graduation.			
If you think you will be graduating with honors, check the appropriate box below. Please refer to the catalog to review the specific requirements for graduation with honors.			
Requirements for Graduating with honors with a bachelor's degree.		Requirements for Graduating with honors with an associate degree.	
Cum Laude (3.30-3.59) <input type="checkbox"/>		With Honors (3.30 – 3.69) <input type="checkbox"/>	
Magna Cum Laude (3.60-3.84) <input type="checkbox"/>		With High Honors (3.70 – 4.00) <input type="checkbox"/>	
Summa Cum Laude (3.85-4.00) <input type="checkbox"/>			

PLEASE READ CAREFULLY:

Your diploma will be ordered with your name as it appears on the Marshall University Student Information Computer System (Banner). The name format is first, middle, last. Please verify the format in which your name will be printed on the diploma in your Dean's Office or the Registrar's Office, Old Main 106A. If you need to change your name officially with the University, please complete a name change application in the Office of the Registrar and submit a copy of your Social Security Card as documentation of the requested change.

Your diploma will be mailed to the permanent address on the Student Information Computer System (Banner). If you need to change your permanent address, please submit a written change to the Office of the Registrar or update your address on MyMU (MILO Web) Personal Information Menu.

PUBLICATION OF DIRECTORY INFORMATION: Upon graduation, Marshall University will publish certain directory information about graduates in the graduation program and will release information to newspapers and other media for publication. The directory information to be published may include name; major; degree; honors; awards received; city, country and state of residence. If you do not want this information released and regardless of any previous requests for confidentiality of directory information, you must notify the registrar's office (stating specifically that you do not want your graduation information published) within 10 business days of submitting this application for graduation.

Student Signature

Date

NOTE: Applications submitted via email are considered to be signed electronically.



Marshall University

Alumni Contact Form

Your future success is important to us. For that reason, Marshall's Office of Assessment would like to contact you six months and one year following graduation to inquire about your employment and/or future education. This information, when analyzed across all of our graduates, will help us to determine whether or not we are adequately preparing our students for success in the world beyond Marshall. So that we may contact you on this schedule, we ask that you provide the email address and telephone number you will use after you graduate.

Please complete this form and return it along with your graduation application to your college dean's office. If you have any questions about this form, please contact the Office of Academic Affairs at (304) 696-6690 or academic-affairs@marshall.edu.

Name: _____

MU ID: 901 _____

MU E-mail Address: _____

E-mail Address you will use after graduation: _____

Telephone # you will use after graduation: _____