

## GRADUATION APPLICATION

SOUTHERN ILLINOIS UNIVERSITY  
SIUE - SIUC GRADUATE SCHOOL

Please read the attached Instruction Sheet for Applying for Graduation before completing this Graduation Application. The completed Graduation application is to be returned to the Graduate School. A \$25 graduation fee will appear on a future Bursar Statement. The deadline to return the Graduation application to the Graduate School is **Friday of the Second Week of the Semester in which you plan to complete the degree requirements.**

If you are in a Concurrent Degree program and are receiving two degrees, please complete two separate Graduation Applications.

**Do you plan to attend the ceremony on the Carbondale campus?**  Yes  No  
(Graduate students may not attend commencement prior to degree completion.)

YOU MAY ONLY ATTEND THE CEREMONY IN THE SEMESTER IN WHICH YOU ARE OFFICIALLY GRADUATING. ATTENDING A FUTURE CEREMONY IS NOT ALLOWED.

Name exactly as you wish for it to appear on your diploma: If different from your name on SIUC records, you must process a name change through the Office of Admissions and Records. Woody Hall A 103.

Please note: **Internationals** – you **MUST** list your first name/given name and last name/family name as it appears on your passport.

\_\_\_\_\_ **First Name / Given Name**                      \_\_\_\_\_ **Middle Name**                      \_\_\_\_\_ **Last Name / Family Name / Surname**

Dawg Tag \_\_\_\_\_

Degree Sought: \_\_\_\_\_ Major: \_\_\_\_\_

If you are receiving a double major indicate the second major here: \_\_\_\_\_

Semester/Year you plan to graduate:                      May \_\_\_\_\_ August \_\_\_\_\_ December \_\_\_\_\_

**Address to use for the mailing of your diploma:**

Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State and Zip: \_\_\_\_\_

**Is this address different than your permanent / home address?**

Yes  No

**Special Needs Assistance** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

*(Commencement related information will be sent via E-Mail. It is important that you provide us with a current and valid E-Mail address in order to receive this information.)*

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**THIS SECTION MUST BE COMPLETED FOR APPLICATION TO BE PROCESSED**

*(Section not required for BME/ME, MBA, MACC, MAT, MLS, MPH, MSPA, MSW, ART, MDOS, Masters/ CURRICULUM AND INSTRUCTION and Masters/MATHEMATICS AND SCIENCE EDUCATION)*

I expect this student will complete:

The Dissertation/Thesis/Research paper by the Graduate School deadlines for the semester in which the student is applying.

This student is in a non-paper option.

**Major Professor Signature:** \_\_\_\_\_

**For Office Use Only**

SPAIDEN \_\_\_\_\_ SHADEGR \_\_\_\_\_ SGASTDN \_\_\_\_\_ DB \_\_\_\_\_ F \_\_\_\_\_