

## **APPLICATION FOR DEGREE**

Graduate Programs
Office of the Registrar

The completion of this form is required. The fall graduation form is due on **September 30** and the spring and summer graduation form is due **January 30**. Failure to return this form by the deadline could delay your graduation. Incomplete or unreadable information on this form may result in errors in your name on your diploma or in the commencement program.

fo	Name: Type or print your name as you want it	to appear on your diploma.	Hometown: Where you are from.		
Personal Info	Mail Diploma to: Include your street address, city, state, and zip code.				
Per	Cell Phone:	Email Address:			
Degree Information	Degree Expected:				
	☐ Master of Arts in Education	☐ Master of Business Administration			
	☐ Master of Science in Nursing	Master of Arts in Organizational Leadership			
	Program: (if applicable)	_			
	Clinical Mental Health Counseling	Family Nurse Practit	nily Nurse Practitioner		
De	School Counseling	<b>_</b>	Acute Care Nurse Practitioner		
		Other:			
	Indicate the semester you will complete all requirements for graduation.				
	Fall Semester	Spring Semester	Summer Semester		
	(year) (ye	ar)	(year)		
pation Information	Malone's Commencement Ceremony takes place after each spring semester. Therefore, the ceremony date which you are invited to participate will be determined by your completion date. Please refer to the list below to determine which ceremony you are invited to attend:				
	If all requirements are completed by the fall 2023, spring 2024, or summer 2024 semester, students will participate in the spring 2024 commencement ceremony.				
	If all requirements are completed after the summer 2024 semester, students will participate in the spring 2025 ceremony or later.				
ipati	Do you wish to participate in the graduation ceremony?				
Partici	If yes, your cap and gown order information is needed. Please provide your height and weight.  The company uses a height to weight ratio to size your gown.  Note: If you are not participating, a cap and gown will <u>NOT</u> be ordered for you.				
	<b>Height</b> (in feet and inches, i.e. 5' 7) <b>Weight</b>				
	<b>Type or print your name phonetically as you wish it to be pronounced.</b> For example: For the last name of Simons, write "Simons sounds like Sigh-mons."				

Educ Only	If you are completing licensure or endorsement requirements as part of a master's degree, you will need to submit an additional, separate application. Some licensure or endorsement areas require a specialty exam. If you have any questions, please contact the School of Education and Human Development.						
Fee	<ul> <li>Graduate Fee: \$135.00 The graduation fee is required and must be paid regardless of whether you choose to participate in the graduation ceremonies.</li> <li>Payment options:         <ul> <li>Check made payable to Malone University (please indicate graduation fee on memo line).</li> <li>Log in to MaloneXpress, select the Student tab or "\$" icon -&gt; Go to ePioneer -&gt; Graduate Program Graduation Fee.</li> </ul> </li> </ul>						
Courses Left to Complete	A copy of your Custom Advising Worksheet must be submitted with this form. Indicate ALL remaining requirements left to complete your degree at the time of applying including any in progress courses below. Please note that your application will not be processed unless this section is completed.						
	Course #	Course Title	Hours	Term			
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Left							
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Please review and sign below:  I have reviewed my Custom Advising Worksheet and understand the graduation requirements listed in the University Catalog. I have discussed any advising questions with my advisor. Failure to fulfill any unmet requirement within the deadlines established may result in changes to my anticipated graduation date and could change the ceremony in which I may participate.							
	Student Signature (E	Date					
Program Director Approval for Graduation							
	Program Director Sig	nature	Date				

Return your Application for Degree and a copy of your Custom Advising Worksheet to the Office of the Registrar via one of the following options:

Note to Program Director: If approved, please send a copy to the Office of the Registrar.

- ✓ Drop your completed form off at the Office of the Registrar located in Founders Hall.
- ✓ Fax your completed form to (330) 471-8661.
- ✓ Email your completed form to registrar@malone.edu.

Feel free to call our office at (330) 471-8128 to confirm that we have received your form.