

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.

Personal Info	Name: Type or print your name as you want it to appear on your diploma.	Hometown: Where you are from.
	Mail Diploma to: Include your street address, city, state, and zip code.	
	Cell Phone:	Email Address:
Degree Information	Degree Expected:	
	<input type="checkbox"/> Master of Arts in Education <input type="checkbox"/> Master of Science in Nursing	<input type="checkbox"/> Master of Business Administration <input type="checkbox"/> Master of Arts in Organizational Leadership
Degree Information	Program: (if applicable)	
	<input type="checkbox"/> Clinical Mental Health Counseling <input type="checkbox"/> School Counseling	<input type="checkbox"/> Family Nurse Practitioner <input type="checkbox"/> Adult-Gerontology Acute Care Nurse Practitioner <input type="checkbox"/> Other: _____
Participation Information	Indicate the semester you will complete all requirements for graduation.	
	_____ Fall Semester (year)	_____ Spring Semester (year)
	_____ Summer Semester (year)	
	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:	
	<ul style="list-style-type: none"> ▶ If all requirements are completed by the fall 2025, spring 2026, or summer 2026 semester, students will participate in the spring 2026 commencement ceremony. ▶ If all requirements are completed after the summer 2026 semester, students will participate in the spring 2027 ceremony or later. 	
Do you wish to participate in the graduation ceremony? <input type="checkbox"/> Yes <input type="checkbox"/> No		
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.		
_____ Height (in feet and inches, i.e. 5' 7)	_____ Weight	
Type or print your name phonetically as you wish it to be pronounced. For example: For the last name of Simons, write "Simons sounds like Sigh-mons."		

Legacy Info	Did one or more of your parents graduate from Malone University? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please list their names as you would like them to appear in the Commencement program.			
	Parent 1 Name:			
	Parent 2 Name:			
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	Graduate Fee: \$135.00 The graduation fee is required and must be paid regardless of whether you choose to participate in the graduation ceremonies. Payment options: <ul style="list-style-type: none"> ▶ Check made payable to Malone University (please indicate graduation fee on memo line). ▶ Log in to MaloneXpress, select the Student tab or "\$" icon -> Go to ePioneer -> Graduate Program Graduation Fee. 			
Courses Left to Complete	<u>A copy of your Custom Advising Worksheet must be submitted with this form.</u> Indicate <u>ALL</u> 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
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 (<i>Electronic signatures will <u>not</u> be accepted.</i>)			_____ Date	
Program Director Approval for Graduation				
_____ Program Director Signature			_____ Date	
Note to Program Director: If approved, please send a copy to the Office of the Registrar.				

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:

- ✓ 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.