Application to Graduate

Instructions: Please complete this form and submit it to the Registrar’s Office in 119 Montgomery Hall as soon as you know your anticipated degree completion date.

Name: ___________________________________ ID.NO: ___________________________

Currently, Muskingum University graduates students at the end of the fall semester and at the end of the spring semester each year. Students who can demonstrate that they will be finished with all degree requirements before the beginning of the Fall semester following commencement may participate in the May commencement ceremony. If you have any questions about this, please contact the Registrar’s Office.

Anticipated Degree Completion Date: I hereby declare my intention to complete all degree requirements by the end of:

☐ December 20____  ☐ May 20_____  ☐ August 20_____  ☐ Other (please specify) ____________

Major(s): I hereby declare my intention to complete the following major(s):

_________________________________________________________   ________________________

Three undergraduate degrees are offered. Majors in nursing receive the Bachelor of Science in Nursing (BSN). Traditional undergraduate students majoring in biology, chemistry, computer science, conservation science, earth science, engineering science, environmental science, geology*, mathematics, molecular biology, neuroscience, petroleum geology, physics, physics education, or psychology will also receive the Bachelor of Science (BS) degree. All other majors are awarded the Bachelor of Arts (BA). *There is a track available for students majoring in geology to earn a BA degree.

Diploma Name: Please PRINT your name exactly as you want it to appear on your diploma:

________________________________________________________________________

By signing this form I authorize Muskingum University to publish my name in the Commencement Program and other graduation related announcements.

Please PRINT your home town and state below

________________________________________________________________________

Signature: ___________________________________________ Date: __________________

Phone number: ___________________________________________