Application to Graduate

This form must be filed by November 15 during the academic year in which you plan to graduate. If you will complete your studies during the fall semester, please submit this form no later than July 1. Submission of this form initiates a graduation audit, a graduation fee on your student account, and the order of graduation regalia. Students will receive graduation audits via email. Due to the high volume of requests, students may not receive audit results for 1-2 months.

Full Name _____________________________________________________________ Date _____________________

First                                            Middle                                            Last  Note: Full legal name is required.

Student ID ___________________ Advisor _________________________________ Campus Location _____________________

Degree Program ______________________________ Track/Specialization ______________________________

Regalia Info: Height in feet & inches _______ Weight in lbs. _________ Spouse’s Full Name ______________________

All graduates will receive standard or rental regalia, including a Western hood. To save you costs, we loan you a M.A. or Ph.D. hood, however if you would like to purchase a hood, please contact Student Services.

TERM OF COMPLETION (All degree requirements completed on or before the last day of the semester):

☐ FALL   ☐ SPRING   ☐ SUMMER   ☐ YEAR___________

☐ I plan to graduate under new curriculum and have turned in the change request.

☐ I have read the general graduation requirements listed in the catalog, and I understand that I am required to participate in Commencement. Note: Graduate Studies Certificate students do not participate in Commencement. Graduate Studies Diploma students may choose to participate, but are not required to do so.

☐ I plan to graduate in absentia, and I understand that I must submit an academic petition to do so. Note: In absentia academic petitions must be received by the first week of February.

☐ I understand that a graduation fee will be assessed to my student account upon submission of this application.

If you have any questions or comments related to completion of graduation requirements or participation in graduation, please explain: _____________________________________________________________________________________

List all degree requirements (e.g. courses, thesis, oral exams, counseling client contact hours, etc.) remaining to be completed and projected dates of completion: ____________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

List all requirements that will be completed after Commencement:

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

PORTLAND & ONLINE CAMPUSES
Attn: Sandy Foster
5511 SE Hawthorne Blvd
Portland, OR 97215-3367
(877) 517-1810 or (503) 517-1833
(503) 517-1801 fax

SAN JOSE CAMPUS
Attn: Jacob Parodi
1000 S Park Victoria Dr
Milpitas, CA 95035
(877) 900-6889 or (408) 356-6889
(408) 668-2800 fax

SACRAMENTO CAMPUS
Attn: Jacob Parodi
290 Technology Way Ste 200
Rocklin, CA 95765
(800) 250-7030 or (916) 488-3720
(916) 488-3735 fax