

APPLICATION FOR GRADUATE DEGREE

CLU Registrar's Office
Commencement fee paid _____

Student should complete this application form and return it to the Registrar's Office with commencement fee one semester before they plan to graduate (completing all degree requirements including comprehensive examinations, thesis or projects). Check for application deadline.

Check the term you expect to complete all degree requirements.

Spring term 20 _____ Summer term 20 _____ Fall term. 20 _____ Winter term.20 _____

• **(Print name exactly as you wish it to appear on the diploma)** CLU ID # _____

Name _____
First Middle Last

Phonetic pronunciation of your name for graduation ceremonies _____

Address: _____
Street City State Zip Code

Phone Number (Daytime) _____ (Evening) _____

E-Mail address _____ work _____

Signature _____

I am a candidate for (check appropriate degree);

Master of Arts (with emphasis in):

- Educational Administration
- Curriculum and Instruction (with specialization in:)
 - CLAD
 - Early Childhood Education
 - Educational technology
 - Elementary Education
 - Physical Education
 - Reading
 - Secondary Education
- Educational Leadership

- Computer Science
- Information Systems Technology

Master of Business Administration (Professional Track:)

- Finance
- Financial Planning
- General
- Information Technology Management
- International Business
- Management and Organizational Behavior
- Marketing
- Small Business/Entrepreneurship
- Customized _____

Master of Science (with emphasis in:)

- Counseling and Guidance (with specialization in):
- Pupil Personnel Services
- College Student Personnel
- Counseling Psychology
- Clinical Psychology
- Special Education

Master of Public Policy and Administration

Master of Education

Doctorate in Educational Leadership

Application for Master's & Doctoral Degree (fill out both sections please)

Alumni Office

Name: _____
Last

Address _____
Street City Zip Code

Graduation Date _____ Date of Birth _____

e-mail address-(home) _____ work e-mail _____

May we contact you by by e-mail? Yes,

Occupation _____ Degree _____

Business address _____ Graduation Date _____

First

For Office Use Only

Student ID. No. _____

Degree Audit Sent _____

Diploma Ordered _____

Degree Recorded _____

Computer-degree record by _____

Computer Application Date _____

For which degree _____

Major _____

Minor _____

Honors _____

Emphasis _____

Degree Date _____

Transcript Sent _____

Diploma Sent _____