

GRADUATION APPLICATION FOR MASTER'S PROGRAM

Ottawa University will order your diploma with the name you print below:

First _____ **Middle** _____ **Last** _____
 Student ID #: _____ Social Security #: _____

Current Mailing Address: _____

City: _____ State: _____ Zip: _____

Home phone _____ Home phone _____
 Work phone _____ Work phone _____
 Cell phone _(____)_____ Cell phone _(____)_____

E Mail Address: _____ Advisor's Name: _____

Program: _____ Concentration Area: _____

Are you currently employed? YES NO If yes, where? _____

What is your position or title? _____

Is this a new job? YES NO If yes, is it related to your field of study at OU? YES NO

If this is not a new job, have you been promoted due to your education at OU? YES NO

Did you complete your degree due to employer requirements? YES NO

To insure graduating when expected please have paperwork in by the appropriate dates.

Actual Date of Graduation	Graduation Application must be in by:	Transcripts from other schools including Dantes tests must be in by:	All Ottawa class work must be completed by:
August 31, 2009	July 4, 2009	July 21, 2009	August 22, 2009
January 31, 2010	November 6, 2002	November 30, 2009	December 11, 2009
May 8, 2010	March 15, 2010	April 5, 2010	May 1, 2010

Please indicate expected graduation date: August 2009 January 2010 May 2010

Do you plan to participate in our May Commencement Ceremony? YES NO

If yes, please provide your height and weight for the cap and gown. Ht: _____ Wt: _____

Student Signature _____ Date _____

Registrar's Office Use Only:	
Date degree requirements met _____	Date degree conferred _____
Audited by _____	Date _____