

APPLICATION FOR DEGREE

Spring (May) Completion – January 15

I will be attending Graduation Activities. Baccalaureate

Awards Banquet

_ I will NOT be able to attend Graduation Activities. I will need to graduate "in Absentia".

Commencement

GRADUATE APPLICATION

UNIVERSITY	
	NAME:
APPLICATION FOR DEGREE Must be submitted to Registrar's Office	Student ID:
By: Fall (December) Completion – October 1 Spring (May) Completion – January 15	Semester to Graduate:
NAME: EXACTLY THE WAY IT WILL APPEAR ON YOU ❖ Titles such as Mr., Mrs., Reverend, Elder ❖ Middle name or initial usually is included	r, etc. are NOT included
Name:	
Phonetic Pronunciation (if needed):	<u> </u>
CONTACT INFORMATION: Please use address AFT	ER graduation
Mailing Address:	
Phone: Cell Hon	
Email:	
Calvary Degree for which you are applying:	
Master of Science (M.S.)	
:	rship Arts cation: Curriculum & Instructions
<u> </u>	cation: Elementary Education
Master of Arts (M.A.)	
Bible and Theology	ical Counseling
Master of Divinity (M.Div.) Pastoral Studies	
Attendance:	

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Requirements:			
I attest that I have met with m	y advisor regarding	my last semester schedule.	
I course requirements for my o	degree will be comp	pleted by	
My Practical Christian Ministry	requirements have	e been met (if required).	
I understand I need to comple ✓ Graduate Survey	te the following surv	veys and/or assessments.	
I understand all financial arran	gements need to be	e made to participate in graduation activities.	
The following information is requi (If attending graduation, this must be fill Height: ft inc	ed out.)		
I will NOT be attend		n, so please don't order regalia for me. ut still want my regalia sent to me. ===================================	:=====
Bachelor's Degree Information: School:	 Degree:	Major:	
Other Degrees:			
School:	Degree:	Major:	
School:	Degree:	Major:	
I hereby apply for the degree noted a charges or student account during m		egistrar's Office to add the graduation fee(s) to my seme nrollment at Calvary University.	ester
STUDENT SIGNATURE		DATE	
Application for Degree must be complete Registrar's Office Calvary University 15800 Calvary Road	ed and returned to:	U(046, 224, 4474)	:=====

Kansas City, MO 64147-1341 <u>O</u>

OR faxed (816-331-4474)

OR e-mailed (registrar@calvary.edu)