APPLICATION FOR DEGREE

PLEASE ADD MY NAME TO THE DEGREE LIST FOR THE FOLLOWING GRADUATION DATE:

GRADUATION PERIOD

❑ May   _____

❑ August   _____

❑ October   _____

❑ December   _____

_____   _____

PRINT LAST NAME   FIRST NAME   MI   UIN

❑ Female

❑ Male

PROGRAM CODE AND DESCRIPTION OF THE MAJOR IN WHICH DEGREE(S) WILL BE RECEIVED, IF KNOWN

Program code: _____ Major: _____

Program Code can be obtained from the UI Integrate Self-Service application (https://apps.uillinois.edu)

PLEASE INDICATE THE DEGREE(S) YOU ARE COMPLETING

❑ EDM	❑ MCL	❑ MME
❑ LLM	❑ MCS	❑ MMUS
❑ MA	❑ MEXED	❑ MS
❑ MARCH	❑ MFA	❑ MSPH
❑ MAS	❑ MHRIR	❑ MSW
❑ MBA	❑ MLA	❑ MUP
❑ CAS	❑ CERT	
❑ AMUSD	❑ JSD	
❑ EDD	❑ PHD	

Are you continuing for doctorate?   ❑ Yes   ❑ No

Are you depositing a thesis?   ❑ Yes   ❑ No

Are you currently registered?   ❑ Yes   ❑ No

Are you in a joint degree program?   ❑ Yes   ❑ No

List the permanent address to be used for correspondence.

Permanent address: _____

_____

_____   _____

Signature of Student/Proxy   Date

STUDENT: PLEASE RETURN THIS FORM TO YOUR DEPARTMENT

FOR DEPARTMENTAL USE :

Approve add to degree list: _____ Date: _____

FOR OAR USE:

OAR Processor: _____ Date processed: _____