



# APPLICATION FOR GRADUATION

OFFICE OF THE REGISTRAR • 2020 East Maple St., North Canton, Ohio 44720-3336  
Phone: 330-490-7367 • Fax: 330-490-7372

## OFFICE OF THE REGISTRAR

Please print your name as you wish it to appear on your diploma and in the commencement program:

FIRST MIDDLE LAST

Please provide a phonetic spelling of your name:

FIRST MIDDLE LAST

Social Security Number    -   -

HOME ADDRESS

CITY STATE ZIP

( ) ( ) ( ) ( )  
HOME PHONE LOCAL PHONE WORK PHONE CELL PHONE

I expect to complete degree requirements in: Summer \_\_\_\_ Fall \_\_\_\_ Spring \_\_\_\_ Year \_\_\_\_

Do you plan to participate in Spring Commencement?  Yes  No (\* Summer Graduates See Below)

**\*ANY SUMMER GRADUATE WHO WISHES TO PARTICIPATE IN THE SPRING CEREMONY MUST SUBMIT A "REQUEST TO WALK" NO LATER THAN FEBRUARY 1. YOU WILL BE NOTIFIED MID-FEBRUARY OF YOUR STATUS FOR COMMENCEMENT.**

- DEGREE:  Master of Arts  Bachelor of Arts  Associate of Arts  
 Master of Science - PT  Associate of Science  
 MBA  Bachelor of Science in Education  
 Bachelor of Science

PROGRAM: \_\_\_\_\_

MAJOR 1: \_\_\_\_\_

MAJOR 2: \_\_\_\_\_

MINOR 1: \_\_\_\_\_

MINOR 2: \_\_\_\_\_

CAP & GOWN INFORMATION	
HEIGHT	WEIGHT

DATE :

STUDENT SIGNATURE

APPLICATION DEADLINES  
SPRING: SEPTEMBER 30 SUMMER: FEBRUARY 1 FALL: JUNE 1