



SCHOOL OF GRADUATE STUDIES
GRADUATION/PROGRAM COMPLETION APPLICATION

Name:	CCSU ID #:
CCSU Email: _____@my.ccsu.edu	Phone: _____
Advisor: _____	Date: _____

Anticipated Month and Year of Completion: May August December January of _____ (year)

Program completing (check all that apply): Certificate Masters Sixth Year Doctoral

CCSU awards degrees and certificates four (4) times per academic year to graduate students who complete their program requirements: fall (December), winter (January), spring (May), and summer (August). **Students MUST complete this form in the semester they are completing the degree and/or certificate requirements in order to have transcripts noted and diplomas sent.**

There are two Commencement ceremonies (December and May). Commencement information is sent to the CCSU email of all eligible students in accordance with requirements outlined in the Graduate Student Handbook. Students completing only a certificate are not eligible to participate in commencement exercises.

Remaining Program Requirements	Semester expected to be completed

Please print your full name below as you wish it to appear on your diploma (if applicable):

First Name(s)
Middle Name(s)
Last Name(s)

Please print the mailing address where you wish to receive your diploma/certificate:

Street Address _____
 City/State/Zip _____ Country _____

Not submitting an Application for Graduation in a timely manner may result in delay in the awarding of your degree and participation in commencement exercises.

This application must be completed and returned to the Office of the Registrar no later than: **October 1st for December/ January completion, February 15 for May/August completion of the year in which you expect to graduate. Forms can be submitted via email to the Office of the Registrar at: regstaff@ccsu.edu**