

# APPLICATION FOR GRADUATION

Office of the Registrar  
Western Kentucky University  
1906 College Heights Blvd #11017  
Bowling Green, KY 42101-1017  
Fax: 270-745-4830

• **Print/Type Name to be printed on diploma. Note: Name must be on record with the university.** If your name changes before your degree requirements are completed, you should file a name change form in the Office of the Registrar and call 270-745-5411.

WKU ID Number \_\_\_\_\_

Permanent Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

• Print your permanent address. Your diploma will be sent to this address approximately six weeks after the term in which all degree requirements are completed. **Address changes are to be made prior to the mailing of your diploma. Contact the Office of the Registrar at 270-745-5411 with any changes immediately.**

( ) \_\_\_\_\_

( ) \_\_\_\_\_

( ) \_\_\_\_\_

Permanent Phone

Local Phone

Cell Phone

WKU Email Address \_\_\_\_\_

• A fee of **\$50 for undergraduate degrees** and **\$55 for graduate degrees** must accompany this application. Any changes in graduation date, commencement date, majors, minors, names or addresses must be reported to the Office of the Registrar immediately. Graduate students should notify the Graduate Studies Office of changes. ***This application and fee are graduation requirements regardless of commencement ceremony participation, and the fee covers the cost of your diploma and cap/gown.***

• **Check type of degree:**

- |                                                                        |                                                                       |                                                                   |
|------------------------------------------------------------------------|-----------------------------------------------------------------------|-------------------------------------------------------------------|
| <input type="checkbox"/> A.A. Associate of Arts                        | <input type="checkbox"/> B.I.S. Bachelor of Interdisciplinary Studies | <input type="checkbox"/> M.B.A. Master of Business Administration |
| <input type="checkbox"/> A.A.S. Associate of Applied Science           | <input type="checkbox"/> B.M. Bachelor of Music                       | <input type="checkbox"/> M.H.A. Master of Health Administration   |
| <input type="checkbox"/> A.I.S. Associate of Interdisciplinary Studies | <input type="checkbox"/> B.S. Bachelor of Science                     | <input type="checkbox"/> M.P.A. Master of Public Administration   |
| <input type="checkbox"/> A.S. Associate of Science                     | <input type="checkbox"/> B.S.N. Bachelor of Science in Nursing        | <input type="checkbox"/> M.P.H. Master of Public Health           |
| <input type="checkbox"/> A.B. Bachelor of Arts                         | <input type="checkbox"/> M.A. Master of Arts                          | <input type="checkbox"/> M.S. Master of Science                   |
| <input type="checkbox"/> B.F.A. Bachelor of Fine Arts                  | <input type="checkbox"/> M.A.E. Master of Arts in Education           | <input type="checkbox"/> M.S.N. Master of Science in Nursing      |
|                                                                        |                                                                       | <input type="checkbox"/> M.S.W. Master of Social Work             |
|                                                                        |                                                                       | <input type="checkbox"/> Ed.S. Specialist in Education            |

• **Identify program(s) of study for this degree:**

**Associate Degree**

Major \_\_\_\_\_

**Bachelor's Degree**

1st Major \_\_\_\_\_

1st Minor \_\_\_\_\_

2nd Major \_\_\_\_\_

2nd Minor \_\_\_\_\_

**Master's or Specialist Degree**

Major \_\_\_\_\_

Minor \_\_\_\_\_

• **All degree requirements (including student teaching and internships) will be completed by:**

May 20 \_\_\_\_  August 20 \_\_\_\_  December 20 \_\_\_\_

• **Print my name in the following commencement program:**

May 20 \_\_\_\_  December 20 \_\_\_\_

August graduates are eligible to participate in either the May or December commencement.

Students who do not want their name in a commencement program must notify the Office of the Registrar in writing.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Mastercard, Visa and Discover Cards accepted.

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_