



GRADUATE APPLICATION

APPLICATION FOR DEGREE

Must be submitted to Registrar's Office

By: Fall (December) Completion – October 1
Spring (May) Completion – January 15

NAME: _____
Student ID: _____
Semester to Graduate: _____

NAME: EXACTLY THE WAY IT WILL APPEAR ON YOUR DIPLOMA

- ❖ Titles such as Mr., Mrs., Reverend, Elder, etc. are NOT included
- ❖ Middle name or initial usually is included.

Name: _____

Phonetic Pronunciation (if needed): _____

CONTACT INFORMATION: Please use address **AFTER** graduation

Mailing Address: _____

Phone: Cell _____ Home _____

Email: _____

Calvary Degree for which you are applying:

Master of Science (M.S.)

- Organization Development
- Education: Admin & Leadership
- Education: Christian Education
- Worship Arts
- Education: Curriculum & Instructions
- Education: Elementary Education

Master of Arts (M.A.)

- Bible and Theology
- Biblical Counseling

Master of Divinity (M.Div.)

- Pastoral Studies

Attendance:

- I will be attending Graduation Activities.
 Baccalaureate Awards Banquet Commencement
- I will NOT be able to attend Graduation Activities. I will need to graduate "in Absentia".
Reason: _____

