

APPLICATION FOR GRADUATION

WINONA STATE UNIVERSITY - SCHOOL OF GRADUATE STUDIES

Complete this form and email, mail or fax to: School of Graduate Studies, Somsen 210C, Winona State University,
PO Box 5838, Winona, MN 55987. Fax #: (507) 457-5571 Email: gradoffice@winona.edu

Warrior ID#: _____ E-mail address: _____

Name: _____
(as you would like it to appear on your diploma)

Home or Cell Phone: _____ Attend Commencement Ceremony: ____ Yes ____ No

Home City & State/Country for Commencement Program Listing: _____

Diploma Address: _____

Permanent or Mailing _____
Address (if different from _____
Diploma Address) _____

Please select which degree you are earning: ____ MA ____ MS ____ MSAT ____ MSW ____ PSM ____ MPA
____ EdS ____ EdD ____ DNP (GC use different form)

Major: _____ Semester/Year for completion of degree: _____

Advisor: _____ Total number of graduate credits for degree: _____

Title of Thesis/SIP/Capstone/Final Project: _____

LIST ALL COURSES IN WHICH YOU ARE NOW ENROLLED AND PLANNING TO COMPLETE PRIOR TO GRADUATION

COURSE NO.	COURSE TITLE	CREDITS	SEMESTER/YR

Signature _____ Date _____
(Signing or typing your signature certifies accuracy of the above information)

FALL SEMESTER COMMENCEMENT CEREMONY held in *December* and a SPRING COMMENCEMENT CEREMONY held in *May*.

Hooding will take place during the Commencement Ceremony. Students completing all degree requirements at the end of Summer Session and Fall Semester will attend the Fall Commencement ceremony held in December. Students completing all degree requirements at the end of Spring Semester will attend the Spring Commencement Ceremony held in May.