

STEPHENS COLLEGE APPLICATION FOR MASTER'S DEGREE

(Type or print **legibly**. This information is for your diploma or certificate and the Commencement program)

NAME (as you'd like it to appear on your diploma):

First

Middle

Last

Home City/State: _____
(Hometown will be listed in the Commencement Program)

DEGREE PROGRAM:

Year/Term you started at Stephens: _____ Month and Year you plan to graduate from Stephens: _____

Degree (select one):
_____ Master of Education in Counseling
_____ Master of Physician Assistant Studies
_____ Master of Fine Arts in TV and Screenwriting

COMMENCEMENT:

Do you plan to participate in a commencement ceremony? Yes No

If yes, in which ceremony will you participate? May (May/Aug graduates) December (December graduates)

If you wish to participate in a different ceremony, you must petition the Registrar's office.

PERMANENT HOME MAILING ADDRESS (This is where your diploma or certificate will be sent):

Street: _____ City/State/Zip: _____

Permanent home telephone number: _____

Cell phone number: _____

Email address (not your Stephens email): _____

NEWSPAPER RELEASE: Yes No

Name of hometown newspaper: _____

Address: _____ City: _____ State: _____ Zip: _____

Note: A \$110 graduation fee will be applied to your account prior to graduation.
Diplomas and official transcripts will not be released unless the student's financial account has been settled or satisfactory arrangements have been made with the Accounting Office.

Stephens College has permission to include my name, hometown city/state and degree in the Commencement Program.

STUDENT SIGNATURE (Required): _____ **DATE:** _____