



APPLICATION FOR MASTER DEGREE CANDIDACY

- **Your NKU e-mail address will be used for any correspondence regarding your degree requirements.**
- The address below will be used for all correspondence regarding the Commencement Ceremony.
- Diplomas will be mailed to your permanent address on file. Check to ensure that your permanent address is correct.
- If you change your name on your NKU record, the name as indicated for your diploma will not automatically be changed.
- Direct any diploma name changes or commencement address changes to the Office of the Registrar

The Graduation Application Fee is \$50. (Please submit with application) Late applications will be charged additional fees.

PLEASE PRINT

FULL NAME _____
(As you wish it to appear on diploma - First, Middle, Last)

ADDRESS _____
Number & Street City State ZIP

SOCIAL SECURITY NUMBER XXX - XX - _____ PHONE _____
(Where you can be reached 8:15 a.m. - 6 p.m.)

SEMESTER/YEAR OF GRADUATION: [] FALL [] SPRING [] SUMMER YEAR _____

DEGREE APPLYING FOR (CHECK ONE):

- | | |
|---|--|
| <input type="checkbox"/> (M.A.) Master of Arts in English | <input type="checkbox"/> (M.B.A.) Master of Business Administration |
| <input type="checkbox"/> (M.E.D.) Master of Arts in Education
Program in _____ | <input type="checkbox"/> (M.A.) Instructional Leadership |
| <input type="checkbox"/> (M.A.T.) Master of Arts in Teaching
Program in _____ | <input type="checkbox"/> (M.B.A.) Master of Business Administration
Specialization in _____ |
| <input type="checkbox"/> (M.P.A.) Master of Public Administration | <input type="checkbox"/> (J.D./M.B.A.) Juris Doctor/Master of Business Administration |
| <input type="checkbox"/> (M.S.C.S.) Master of Science in Computer Science | <input type="checkbox"/> (M.S.N.) Master of Science in Nursing
Major in _____ |
| <input type="checkbox"/> (M.ACC) Master of Accountancy | <input type="checkbox"/> (M.A.) Communication |
| <input type="checkbox"/> (M.A.) Integrative Studies | <input type="checkbox"/> (M.S.) Executive Leadership and Organizational Change |
| <input type="checkbox"/> (M.S.) Industrial-Organizational Psychology | <input type="checkbox"/> (M.S.) Business Informatics |
| <input type="checkbox"/> (M.A.) School Counseling | <input type="checkbox"/> (M.S.) Health Informatics |
| <input type="checkbox"/> (M.S.) Community Counseling | |

STUDENT SIGNATURE

DATE

NOTE: You will be notified regarding procedures for attending commencement.

If you are downloading this form, please submit a copy to the program director.