



**Diploma Name:** Please print your name exactly how you intend for it to be printed on your diploma. If the name you are requesting is different than your current legal name, you must present the legal documentation (e.g. court order, social security card) for copying to the Office of the Registrar authorizing the name change. If special text characters (e.g. é, ü, ñ) are included in your name, check here:  SPECIAL CHARACTER

\_\_\_\_\_ @ \_\_\_\_\_  
First Name Middle Name/Initial Last Student ID #

**Degree/Program:**  Master of Arts in Leadership  Master of Arts in Higher Education  
 Ph.D. in Leadership  Master of Science in Physician Assistant Studies

**Completion Date:**  Interterm  Spring  Summer  December 20

**Plan for Completion:** List all courses you plan to complete in upcoming terms in order to complete your remaining degree requirements.

Course #	Title	Credits
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**Fall 20**


**Winter/Interterm 20**


Course #	Title	Credits
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**Spring 20**


**Summer 20**


I plan to attend Spring Commencement. My height is \_\_\_\_\_ feet \_\_\_\_\_ inches.

I do not plan to attend Spring Commencement because \_\_\_\_\_.

My home country is \_\_\_\_\_. My home state (if USA) is: \_\_\_\_\_.

While Taylor University publishes program information and materials to assist me in planning my academic program, I am solely responsible for completing all Taylor degree requirements and for ensuring that my course selections fulfill all academic program requirements and comply with the policies and procedures of the University. I fully understand that although an evaluation of my academic record will be conducted by the Registrar's Office, that I will be notified of all outstanding requirements and/or deficiencies in my plan, and that the application for graduation requires the signatures of my academic advisor and graduate chair, I am solely responsible for ensuring that all Taylor degree requirements are met for graduation.

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

Academic Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_

Graduate Chair Signature \_\_\_\_\_ Date \_\_\_\_\_

Any Additional Notes: