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College of Liberal Arts and Sciences
VILLANOVA UNIVERSITY

APPLICATION FOR GRANTING OF MASTER'S DEGREE

PLEASE COMPLETE THIS FORM AND SUBMIT ORIGINAL TO GRADUATE STUDIES, VASEY HALL, ROOM 201 AND A COPY TO YOUR DEPARTMENTAL CHAIRPERSON

Submission Date is listed in Villanova University Catalog Graduate Studies, Liberal Arts and Sciences (see Academic Calendar)

*1. I should be awarded the degree dated: September _____ (year) December _____ (year) May _____ (year)

2. Which degree: Master of Arts in _____

Master of Science in _____

3. **PLEASE COMPLETE THE FOLLOWING INFORMATION FOR THE COMMENCEMENT PROGRAM**

A. Undergraduate degree received (for example, B.A., B.S., etc.) _____

B. Undergraduate major _____

C. Year degree received _____

D. Undergraduate college attended (indicate country if not USA)

_____

_____

Please print your name *EXACTLY* as it is to appear on the diploma and supply your mailing address

_____

First name | Middle Initial or Name | Family Name | Initials of Religious Order (if applicable)

Please Sign: _____

_____

Street | City | State | Zip Code

_____

Student ID | Telephone #

*** IF YOUR DEGREE IS NOT AWARDED ON THE DATE STATED ON THIS FORM (ITEM #1), *YOU MUST REAPPLY*.** Please check the Graduate Studies Academic Calendar regarding this form's submission deadline for your expected graduation date.

Revised June 4, 2004