



## INTENT TO GRADUATE FORM

### ADVANCED (MASTERS OR PHD) DEGREE

Due by midterm of the semester prior to graduation

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

I hereby declare my intention to complete the requirements for the degree of:

**MASTER OF SCIENCE in** \_\_\_\_\_  
with SPECIALIZATION in \_\_\_\_\_

**MASTER OF ENGINEERING in** \_\_\_\_\_  
with SPECIALIZATION in \_\_\_\_\_

**PROFFESIONAL MASTER in** \_\_\_\_\_  
with SPECIALIZATION in \_\_\_\_\_

**MASTER OF SCIENCE FOR TEACHERS** \_\_\_\_\_

**MASTER OF ENGINEERING MANAGEMENT** \_\_\_\_\_

**DOCTOR OF PHILOSOPHY in** \_\_\_\_\_  
with SPECIALIZATION in \_\_\_\_\_

To be completed at the end of the \_\_\_\_\_ Summer (Year)  
\_\_\_\_\_ Fall (Year)  
\_\_\_\_\_ Spring (Year)

\*\*\*If for some reason you do not complete the requirements for your degree during the semester indicated, it is your responsibility to update this declaration at the Office of Graduate Studies.

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Chairman of Committee or Advisor Signature**

\_\_\_\_\_  
**Graduate Office Signature**

Address to Send Diploma to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number:

\_\_\_\_\_