

Student Name: _____

PROGRAM

Prior to completing this section, ensure that the student has completed all degree requirements except for their official submission of a thesis or dissertation or the final formal examination. After completing this section, return the form to the student.

- APPROVED
- NOT APPROVED

Thesis or doctoral committee Chair (print name, then sign)

Date

Graduate Group Chair (print name, then sign)

Date

INTERNATIONAL CENTER

International students only: Please obtain approval from UCM's SEVIS/Visa Coordinator prior to submitting this form to the Graduate Division.

- APPROVED
- NOT APPROVED

SEVIS/Visa Coordinator (print name, then sign)

Date

GRADUATE DIVISION USE ONLY

Last semester student received any funding support at UCM: Fall Spring Year: _____
Graduation Application filed with Registrar's Office for: Fall Spring Summer Year: _____
Filed an Academic Leave request in the semester prior to request for filing fee status: Yes No If yes, semester & year: _____
Advancement to Candidacy: _____

Number of units completed: _____ GPA: _____

Processed Date: _____ By: _____

- APPROVED
- NOT APPROVED

Date

Graduate Division Dean Signature

Registrar Office Use Only:

Effective Date: _____ Date fees paid: _____

Processed Date: _____ By: _____