Graduate & Professional Schools Application for Degree/Certificate
Tulane University Office of the Registrar

Date ____/____/____

I.D . | | | | | | | | | | Email_____ Local/Cell Phone_____

Home Town: (to be printed in commencement program) _____
city state country

My name should appear on my diploma as follows:

First Name

Middle Name (initials not desirable)

Last Name Suffix (Jr. II III)

At the Fall 20 _____ Spring Commencement 20 _____ Summer 20 _____ I expect to receive the following degree(s)/certificate(s):
Certificates conferred by Tulane University, not state or federal certifications.

School_____Degree_____Major 1_____ Major 2_____

Minor 1_____ Minor 2_____Certificate*_____

I would like my pre-renewal college _____printed on my diploma. yes☐ no ☐

SPRING COMMENCEMENT:

Attending unified commencement on Thursday 5/12 at the Convention Center? ☐ **Yes** ☐ **No**
If attending, please indicate number of anticipated guests _____ .

Diplomas will not be issued at the Spring 2011 ceremony. Please indicate method of diploma delivery.

Diploma Delivery: (check one)
- ☐ I will pick up my diploma after commencement at the Registrar's Office, 110 Gibson Hall.
- ☐ Mail my diploma. Diplomas will **NOT** be mailed without an address provided below.

Address:_____

_____

FOR ALL CANDIDATES IN GRADUATE DIVISIONS

Thesis Required? Yes ☐ No ☐

Title of Dissertation ☐ Thesis ☐ _____

_____

Members of Committee _____ _____
Director

_____ _____

Previously Earned Degrees:

Degree	Institution	Year	Degree	Institution	Year

If your account is encumbered by Accounts Receivable or Student Loans, you must first clear your account before your diploma can be released. I certify that I have read the requirements for graduation as presented in the catalog of my School and that to the best of my knowledge I meet all of them, or will meet them by the expected date of graduation.

Signature of Applicant _____

White - Registrar Yellow - School