



# Application for Graduation For Doctoral Degrees

Return completed,  
received form to:  
School/College Office

Page 1 of 2

Please consult the Academic Calendar for application deadlines for January, May, and August graduation dates.  
This form will not be accepted without having been received by Cash Operations. Fees are subject to change.

## STUDENT INFORMATION

SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_  
First, Middle, Last as you wish your name to appear on your diploma

Current Address \_\_\_\_\_  
Street

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ - \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_ - \_\_\_\_\_

Do not write in this space.  
For Cash Operations only.

Graduation Fee: \$35  
800-4902-102480000

## Degree Information

Degree Sought \_\_\_\_\_ Graduation Date:  
January   
May  year \_\_\_\_\_  
August

Program \_\_\_\_\_

College \_\_\_\_\_

Advisor \_\_\_\_\_

Last Semester Registered (fill in year):  
Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer 1 \_\_\_\_\_ Summer 2 \_\_\_\_\_

## Current Courses

Dept.	Course #	Title	Hours	Semester	Instructor
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

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Microfilming Fee: \$68.00  
800-4983-102480000

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Dissertation Processing Fee: \$50.00  
800-4981-102480000



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**Semester Hours**

Graduate Hours Completed to Date at Temple	_____
Advanced Standing (from other institutions)	_____
Incompletes and/or NRs	_____
Currently Registered	_____
<b>TOTAL</b>	_____
Number of Hours Required by Your Program	_____

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Mailing Fee: \$7.35  
(non-refundable)  
800-4999-103940000

**Incompletes**  
Please list Incomplete, Unreported, and/or Missing Grade(s):

Dept.	Course #	Title	Hours	Semester	Instructor
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

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Copyright Fee: \$45.00  
Optional (see below)  
800-4982-102480000

**Undergraduate Degree Information**

**Undergraduate Degree** \_\_\_\_\_ / \_\_\_\_\_  
Month/Year

University \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

**Additional Degree** \_\_\_\_\_ / \_\_\_\_\_  
Month/Year

University \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

**Mailing Information**

To receive your diploma by mail for an additional charge of \$7.35,  
please fill in your permanent mailing address below:

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Dissertation**

Please attach a copy of the title page.

You may copyright your dissertation  
for an additional fee of \$45.

Do you wish to copyright your  
dissertation?

Yes    No