



*SAINT MARTIN'S UNIVERSITY  
APPLICATION FOR GRADUATION*



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

Name: \_\_\_\_\_ Student Id Number: \_\_\_\_\_

Major	Advisor
Second Major	Second Advisor
Minor or Concentration	Minor or Concentration

Site where student file is maintained:       Lacey       McChord       Olympic  
 Fort Lewis       Centralia       Tacoma

**Degree to be received:**

- |  |  |
|--|--|
| <input type="checkbox"/> Bachelor of Arts<br><input type="checkbox"/> Bachelor of Science<br><input type="checkbox"/> Bachelor of Science in Civil Engineering<br><input type="checkbox"/> Bachelor of Science in Mechanical Engineering | <input type="checkbox"/> Master of Arts in Counseling Psychology<br><input type="checkbox"/> Master of Business Administration<br><input type="checkbox"/> Master in Teaching<br><input type="checkbox"/> Master of Education<br><input type="checkbox"/> Master of Engineering Management<br><input type="checkbox"/> Master of Civil Engineering |
|--|--|

Date you intend to complete your degree:

December: \_\_\_\_\_ Year      May: \_\_\_\_\_ Year      August: \_\_\_\_\_ Year

**Current Address**

**Permanent Address**

Commencement information will be mailed here

To keep your record up-to-date, provide a permanent address and email. This information is used only by SMU.

Telephone: _____	Email: _____

Commencement for graduation dates of Dec, May, and Aug will be held in May on Main Campus in Lacey. For extension campus recognition ceremonies - information can be obtained from the Fort Lewis Office.

Do you want to participate in the commencement ceremony?       Yes       No  
 Where?       Lacey (Main Campus)       Extension

If **YES**, your height and weight are used to order the size of your gown

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Do you want to participate in the baccalaureate ceremony?       Yes       No

**Baccalaureate** is the hooding ceremony, which is optional. If unsure, please mark "Yes" to reserve your spot.

Name as you want it to appear on your diploma: (please print clearly using UPPER and lower case)

First Name	Middle Name	Last Name
Hometown: _____ (this will appear in the printed program at the ceremony)		
City	State	

Return COMPLETED form to the Office of the Registrar, Saint Martin's University, Lacey WA. 98503

Active Duty Only:     Army       Air Force       Navy       Marines       Coast Guard

Active Duty Rank: \_\_\_\_\_ Military Unit: \_\_\_\_\_

**Office Use Only**    Entered by: \_\_\_\_\_    Date: \_\_\_\_\_