SCHOOL OF PUBLIC POLICY INTENT TO GRADUATE

Please type or print name clearly: (AS YOU WISH IT TO APPEAR ON YOUR DIPLOMA) FIRST MIDDLE LAST IF NAME GIVEN ON THIS FORM IS DIFFERENT FROM CURRENT NAME, PLEASE INCLUDE SUPPORTING LEGAL DOCUMENTS (BIRTH CERTIFICATE, MARRIAGE LICENSE, COURT ORDER, MARRIAGE ANNULMENT, ETC.) SOCIAL SECURITY # DATE OF BIRTH F MI TERM YOU EXPECT TO YEAR: FALL (December) SPRING (April) SUMMER (July/August) COMPLETE YOUR DEGREE: MPP SPECIALIZATION (Check one) DEGREE YOU EXPECT TO RECEIVE: J.D. - MPP Public Policy and Economics MBA - MPP Public Policy and American Politics MDR - MPP Public Policy and International Relations Regional and Local Policy PERMANENT ADDRESS FOR DIPLOMA MAILING **CHANGE OF ADDRESS** NUMBER/STREET APARTMENT OR C/O COUNTRY (Other than USA) CITY ZIP CODE PHONE # STATE DO YOU PLAN TO ATTEND THE GRADUATION CEREMONY? HAVE YOU PREVIOUSLY APPLIED FOR GRADUATION? YES NO IF YES, WHEN? STUDENT'S SIGNATURE DATE FOR OFFICE USE ONLY **GRADUATION FEE AMOUNT** REGISTRAR'S OFFICE

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