



APPLICATION FOR GRADUATION

Print Name: _____ Student ID: _____

Semester of Expected Graduation: FALL/December 20____ SPRING/May 20____ SUMMER/July 20____

NAME: _____
Please **PRINT** name exactly as it should appear on your diploma.

Contact Phone Number: _____

MSU Email Address: _____@msu.edu

.....
CANDIDATE FOR: _____ Juris Doctor (J.D.) _____ Master of Laws (LL.M.) _____ Master of Jurisprudence (M.J.)
.....

You **MUST** complete the following information, if applicable:

DUAL DEGREE: NAME OF INSTITUTION: _____

NAME OF COLLEGE: _____

DEGREE TYPE AND MAJOR: _____
(e.g., Masters, PhD./BUS, LIR, MPA)

CERTIFICATE(S): _____
(e.g.: Fieger Trial Practice Program, Chance at Childhood)

CONCENTRATION: _____
(not eligible to declare if you entered Fall 2008 or after)

.....
Student's Signature: _____ Date: _____

NOTE: It is recommended that you complete a Graduation Requirement Checklist at this time for your records. This form is located outside the Registrar's Office in the form box or on the web at <http://www.law.msu.edu/academics/checklist.pdf>

.....
This form can be faxed, mailed, emailed, or brought in person to the Registrar's Office.

Michigan State University College of Law
Registrar's Office
648 N. Shaw Ln., Room 309
309 Law College Building
East Lansing, MI 48824
Phone Number: 517-432-6820
Fax Number: 517-432-6821
Email: regist@law.msu.edu

.....
OFFICE USE ONLY:

SIS-APPL: _____ Termsumm updated: _____ Groupwise updated: _____

Cum GPA: _____ Honors awarded: _____ # of diplomas mailed: _____

of JP Awards mailed: _____ # of Conc./Cert. mailed: _____ Names of conc./cert.: _____