

**Concord University
Application for Graduation
Graduate Programs**

Return application to: Concord University, Office of the Registrar, P.O. Box 1000, Campus Box D-118, Athens, WV
24712-1000 Phone: 304-384-5236 or 5237 Fax: 304-384-5349 Email: registrar@concord.edu

Note: *The name on your diploma will appear as you have it listed below*

Name _____
First Middle (full or initial) Last

Social Security #/ Student ID # _____

Home Address _____

Email Address _____ Home or Cell Phone _____

I hereby make application for graduation on _____
(Specify date of graduation)

_____ I am a candidate for the Master of Education (M.Ed.) Program

(Specify Cognate Below)

_____ Educational Leadership

_____ Reading Specialist

_____ Special Education

_____ I am a candidate for the Master of Arts in Teaching (MAT) Program

(Specify Teaching Field/Grade Levels Below)

_____ I am a candidate for the Master of Arts in Health Promotion (MAHP) Program

_____ I am a candidate for the Master of Social Work Program (MSW)

Complete this form, pay the fee at the Business Office, contact the Bookstore for cap/gown information, and return this application to the Registrar's Office. You will receive a Graduation Audit within 3 to 4 weeks. Upon receipt of this audit, please check it carefully and contact the Registrar's Office if you have questions.

Business Office Receipt Number _____ ***University Bookstore Approval*** _____

(Late fees do not apply to the Masters Degree programs)