

THE UNIVERSITY OF SOUTHERN MISSISSIPPI

THE GRADUATE SCHOOL

DEFERRED GRADUATION REQUEST

GRADUATE STUDENTS WHO REQUEST THEIR APPLICATION FOR GRADUATION BE MOVED TO THE NEXT SEMESTER: \$50 FEE.

After completing this form, take it to the Business office (Forrest County Hall), pay the fee and have the form stamped "PAID" by the business office and return to the Graduate Degree Auditor (McCain Library, Room 205) (Box 5024).

NAME _____

EMPL _____

Major Applied For: _____

Degree Applied For:

- MA
- MAED
- MAT
- MATL
- MBA
- MED
- MFA
- MLIS
- MM
- MME
- MPA
- MPH
- MS
- MSN
- MSW
- EDS
- SLIS
- DMA
- DME
- EDD
- PHD

I request that my application for degree be moved from

_____, 200__ semester to

(Fall, Spring, Summer)

_____, 200__ semester.

(Fall, Spring, Summer)

I understand that I must register for one hour and pay the deferred graduation fee.

Student's Signature

Entered into People Soft _____
Date Initials