

INTENT TO GRADUATE FORM

MANHATTAN COLLEGE GRADUATE SCHOOL OF EDUCATION

1. This form must be submitted on the schedule below the semester BEFORE your anticipated graduation date. Late submissions will be assigned to the next graduation date.
2. Return copy with original signature to your Program Advisor
3. KEEP A COPY TO SUBMIT WHEN YOU APPLY FOR GRADUATION
4. Without this form on file, you will not be able to apply for graduation.

Please PRINT.

NAME: _____ SS#: _____ / _____ / _____
ADDRESS: _____ APT _____
CITY: _____ ST _____ ZIP _____
DAY PH: (____) _____ EVE PH: (____) _____
CELL PH: (____) _____ EMAIL: _____

ANTICIPATED GRADUATION DATE:

- September 1. (Intent Form Due during April) Date Submitted: _____
 February 1. (Intent Form Due during September) Date Submitted: _____
 May ceremony (Intent Form Due during November) Date Submitted: _____

PROGRAM for the degree

- Counseling
 Administration
 Special Education
 Technology
 Autism

DEGREE you will receive

- Master of Arts
 Master of Science Education
 Professional Diploma
 Professional Diploma in Advanced Leadership Studies
 Certificate

Credits Completed: _____

Credits in progress: _____

Semester/Year of Research: ____/____

Semester/Year of Practicum/Internship: ____/____

- I have taken Child Abuse at Manhattan College in Course #: _____ Semester/Year _____
 I have take SAVE legislation at Manhattan College in Course # _____ Semester/Year _____
 I have taken Child Abuse from an approved provider. Please *attach a copy* of your certificate.
 I have taken SAVE legislation from an approved provider. Please *attach a copy* of your certificate.

Signature (Student)

Date

Signature Program Advisor

Date