



MASTER of EDUCATION
Application for the Awarding of Degree

PLEASE PRINT LEGIBLY OR TYPE
(RETURN TO THE REGISTRAR'S OFFICE WITH PAID RECEIPT#)*
Commencement Date Saturday, May 4, 2019

Name: _____
(EXACTLY as it should appear on the Diploma and Commencement Program)

Student ID# _____ Last 4 of SS# _____ Phone# _____

Legal Home Permanent Address: _____

Degree for which you are making application: Master of Education

Concentrations: (Please check one area)

Intervention Specialist: Mild/Moderate _____ Early Childhood _____

Educational Leadership: _____ Athletic Coaching Leadership: _____

Integrated Arts: _____

Semester in which you plan to complete your degree: (Please check one)

Summer Semester 2018 _____

Fall Semester 2018 _____

Spring Semester 2019 _____

Summer Semester 2019 _____

Due date for Application: Fall – May 31 Spring & Summer – October 31

All students are required to participate in the commencement ceremony; therefore, cap and gown order forms must be completed (no additional fee). In order to be excused, you must submit a written request to: Tami Sheets, Registrar, University of Rio Grande, PO Box 500, Rio Grande, OH 45674 tsheets@rio.edu

NOTE: Do you have need of special health or physical consideration in order to participate in the ceremony? Please CIRCLE Yes or No. We would like to assure your ability to have an enjoyable commencement with your friends and family. IF IT IS POSSIBLE, PLEASE ATTACH A BRIEF EXPLANATION.

In order to participate in Spring Commencement but finish classes in the summer, you must have no more than 12 hours to complete your degree.

Are you a relative of a University of Rio Grande employee? Please CIRCLE: YES or NO
Employee: _____ Relationship: _____

X _____
STUDENT SIGNATURE DATE

RECEIPT NUMBER _____

FEE REQUIRED: \$135.00*

*The University reserves the right to change rate as necessary.