PEPPERDINE UNIVERSITY Seaver College

Intent to Graduate Form

(Graduate)

Student ID #			Degree You Expect to Receive				Term You Expect to Complete Your Degree		
Date of Birth			□ M.A	A. □ M.:	S. □ MDiv	□Fa	ll □Sprin	g □Summer	
Gender	□ Female	□Male	Major(s) Year			ear			
Clearly print or type your name as it should appear on your diploma									
If the name given above differs from your current name, please include supporting legal documents (birth certificate, marriage licence, court order, etc.)									
Permanent Address for Diploma Mailing									
Street Address									
City				State		Zip			
Country				Phone					
Does your grade				□ Ye:	s	□ No			
Do you plan to participate in the April 2006 graduation ceremony?						□ Ye	□ Yes □ No		
Have you previously applied for graduation?						□ Ye:	s	□ No	
I understand my responsibility to complete my degree requirements as specified in the Seaver College catalog.									
Signature			Date						
Please return this application with your \$65.00 graduation fee to the following address. Make your check or money order payable to Pepperdine University.									

Seaver Graduate Programs

24255 Pacific Coast Highway Malibu, California 90263-4280

For Official Use				
OSIS	Date			