

St. Mary's College of Maryland

at Historic St. Mary's City

APPLICATION FOR GRADUATION

NAME: _____ ID# _____

PERMANENT ADDRESS: _____

MAJOR: _____

If dual, indicate both; circling the one you wish to march under.

ANTICIPATED COMPLETION OF GRADUATION REQUIREMENTS _____
Semester/Year

B.A. DEGREE TO BE GRANTED AT COMMENCEMENT IN MAY _____
Year

Student's Signature _____ DATE _____