·····ATTENTION!·····

IF YOU ARE GRADUATING THIS SPRING OR SUMMER

(i.e. all of your courses, thesis, dissertation or project will be completed by April or August), you must return the **completed Graduation Degree Clearance Forms** to the Graduate School by the following dates:

For **Spring** graduates**: April 22, 2005.** For **Summer** graduates: **September 22, 2005.**

Please fill out the request below for a clearance form and either bring it to the Graduate School Office Dugan Hall, South Campus, fax, or mail to:

University of Massachusetts Lowell
The Graduate School
883 Broadway St.
Lowell, MA 01854-5130
Fax: (978) 934-3010

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Request for Graduation Clearance Form

I will graduate in _____Spring 2005 I will graduate in _____Summer 2005

Name:_____ID#:_____

Daytime telephone number:_____

Degree:_____Major:_____Option:_____

Please send the clearance form to me at the following address:

_____
_____
_____

I understand that it is my responsibility to obtain all signatures and return the completed forms to the Graduate School by **April 22, 2005** for **Spring** graduation or by **September 22, 2005** for **Summer** graduation. I also understand that I must register for a course or for Continuing Matriculation during the semester in which I graduate.

_____ _____
Signature date

_____Please send me the thesis guide. Thesis and Dissertations must be defended and copies submitted to the Library for binding and microfilming by the deadline dates listed for degree clearance.

Please allow 2 weeks from the time you mail your request to receive the graduate degree clearance forms.

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