



DECLARATION OF INTENT TO GRADUATE

(Master's, Ed.S. or Doctoral Degree)

OFFICE OF THE REGISTRAR
220 PAWTUCKET STREET, UNIVERSITY CROSSING, SUITE M10
LOWELL, MA 01854

phone: 978-934-2550
fax: 978-934-4076
email: registrar@uml.edu

For Summer completion: Degrees conferred on August 31, 2019
Deadline to apply: **August 16, 2019**
Deadline to submit thesis/dissertation to Library: **August 23, 2019**

For Spring completion: Degrees conferred on May 18, 2019
Deadline to apply: **March 29, 2019**
Deadline to submit thesis/dissertation to Library: **May 10, 2019**

For Fall completion: Degrees conferred on February 1, 2020
Deadline to apply: **December 16, 2019**
Deadline to submit thesis/dissertation to Library: **December 18, 2019**

I intend to graduate in: Spring Summer Fall

First Name Last Name MI

SiS ID# Telephone E-mail

Degree Major Option

Previous Degree Information (Students must fill out and please do not abbreviate the name of the school.)

Bachelor's Degree (BS, BA...) Country Year School

Other Degree (BS, BA...) Country Year School

If Required by Program:

Thesis/Dissertation Title

Anticipated Defense Date

Please be aware a student will not be cleared to graduate until a final review by the academic department confirms that the student has successfully completed all requirements for the degree.

I certify that the student has met all requirements of the degree program pending successful completion of the final semester grades and/or submission to the library for publishing.

Thesis/Dissertation Advisor (if applicable) _____
Signature

Graduate Coordinator _____
Signature

College Dean _____
(Education and Engineering only) Signature

I understand that I must register for a course or for Continuing Matriculation during the semester in which I graduate. (International students must have ISSO approval for course registrations for fewer than nine credits).

Date

Student Signature

Please submit the completed form by email, fax, mail or in person to the Registrar's Office (see above).

For Office Use Only:

Doc Type: Clearance Form

Processor Name Date Verifier 1 Name Effective Term

Imager Name Date Verifier 2 Name