FOR OFFICE USE	FOR OFFICE USE

INTENT TO GRADUATE 2011-2012

READ INSTRUCTIONS CAREFULLY:

A. Form is due no later than the second week of the quarter in which you graduate unless otherwise stated. M4s graduating in the spring quarter must submit the form by March 16th. Summer quarter graduates must submit this form no later than the Friday of the second week of the **SPRING** quarter (April 6th 2012). Forms not filed by the deadline will be charged a $25 processing fee.
B. If you do not graduate as planned, inform the Office of the Registrar immediately! A new Intent to Graduate form will be required.
C. **PhD students** and MS students writing a formal thesis must supply their dissertation/thesis title to the Office of the Registrar no later than **MAY 1st**.
D. Return this form to the Office of the Registrar (440 Armour Academic Center) or fax to (312) 942-2310.
E. If your name is legally changing and you wish for your diploma to be issued in that name, please speak with the Office of the Registrar.

STUDENT ID# 00 ___ ___ ___ ___ ___

LAST Name _____

FIRST Name _____

Address _____

City _____

State _____ Zip _____

Phone (Day or message) _____

Personal E-mail _____

Advisor's Name _____

PARTICIPATION IN COMMENCEMENT JUNE 2012

Students who have completed or will complete degree requirements Fall '11, Winter '12, Spring '12 and Summer '12 may participate in commencement on **June 9, 2012** (with certain exceptions).

☐ **I WILL PARTICIPATE** ☐ **I WILL NOT PARTICIPATE**

QUARTER/YEAR OF GRADUATION

Indicate **Quarter & Year** in which you complete degree requirements:

☐ SUMMER (Aug/Oct) ☐ FALL (Dec)

☐ WINTER (March) ☐ SPRING (June) YEAR: **20**___

INDICATE DEGREE & MAJOR

☐ Bachelor of Science, major in _____
☐ Master of Science in Nursing (M.S.N.) _____
☐ Master of Science, major in _____
☐ Doctor of Audiology (Au.D.)
☐ Doctor of Nursing Practice (D.N.P.)
☐ Doctor of Medicine (M.D.)
☐ Doctor of Nursing Science (D.N.Sc.)
☐ Doctor of Philosophy, major in _____

NAME FOR DIPLOMA & COMMENCEMENT

PRINT name exactly as it is to be printed on diploma.
(Name only, NO degree abbreviations.)

First _____

Middle _____

Last _____

Is your name frequently mispronounced?
Spell it "the way it sounds" below for the commencement announcer.

First _____

Middle _____

Last _____

ALL STUDENTS MUST COMPLETE MAILING INFORMATION

Rush awards "live" diplomas at commencement to eligible students and mails all others. As a precaution we need a mailing address for every graduate in case a diploma is not available for Commencement.

#1 ☐ Send my diploma to same name and address as above.

#2 ☐ Send my diploma to another address as indicated below.

Address _____

City _____

State _____ Zip _____

PREVIOUS DEGREES EARNED
(Only list other baccalaureate, master's, or doctoral degrees)

Degree (NOT major)	Name of College/University

By signing this form, I acknowledge that I have read and agree to the information contained on both sides of this form.

_____
STUDENT'S SIGNATURE

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Level: UNDG GRAD PROF	☐ DATABASE
Comm: YES NO PREV	☐ TRANS CHECK
Honors: CUM MAG SUM	☐ DIPLOMA ORDERED

Additional Commencement Ceremony Information

If your PARENT, SISTER/BROTHER or SPOUSE/SAME SEX DOMESTIC PARTNER holds the rank of instructor or above on the **Rush University faculty** or is a current member of the **Board of Trustees/Board of Overseers**, please fill out the below information if you wish to have him/her present your diploma to you at Commencement. The Office of the Registrar will contact your relative with further details. **ONLY persons satisfying these specific criteria will be permitted to present the diploma.**

Name	Relationship to You	Department	Rank
	☐ *Mother* ☐ *Father* ☐ *Sister* ☐ *Brother* ☐ *Wife* ☐ *Husband* ☐ *Same Sex Domestic Partner*		

Do you have any relative(s), living or deceased, who graduated from Rush? If yes, please list the name(s), relationship, and approximate dates of attendance below.

Name	Relationship to You	Dates of Attendance

Important Information

1) Should you wish to have the name that is printed on your diploma be different than the name read at Commencement (i.e. John David Matthews printed on diploma vs. John D. Matthews to be read at Commencement) please speak with the Office of the Registrar to determine if complying with your request is possible.

2) By signing the front page of the Intent to Graduate form you give permission for Rush to print the following information in any Rush graduation program and/or announce this information at any Rush graduation ceremony: your name as indicated on this form, any honors or awards received, the Rush degree and major you are earning, previous colleges/universities attended, and degrees earned at those previous colleges/universities.

3) If you previously submitted a Directory Information Restrictions form, your signature on the Intent to Graduate form also temporarily releases (for graduation ceremony/program purposes only) the directory information restrictions you enacted for the specific items mentioned in #2 (above) so that the information can be published in any Rush graduation program and/or announced at any Rush graduation ceremony. In addition, your signature permits Rush University to release your name and address to the external photography vendor with whom Rush contracts, and to have the vendor place graduation photographs of you on its Web site. Your signature also allows the University to publish your picture in a picture composite and your image in a DVD that is created and distributed of the Commencement ceremony. The recording of the graduation ceremony could also appear on the Rush University web site and/or social media sites including but not limited to YouTube and Facebook. Finally, if you are a medical student, your signature also permits publication of your name, photograph, previous degrees earned, and other information in the Rush Medical College yearbook.

4) If you are a medical student, by signing this form you give permission for Rush University to release your name, date of birth, social security number, major, and degree date to the Illinois Department of Financial and Professional Regulation. If you are a GEM nursing student, by signing this form you give permission for Rush University to release your name and degree date to Continental Testing Service for NCLEX purposes.

5) If you indicate on the Intent to Graduate form that a relative graduated from Rush or is on Rush's faculty and you sign the front page of this form, the Office of the Registrar will provide the following information to the Office of Alumni Relations: your name as indicated on this form, your Rush University student identification number, the degree and major you are earning, the degree date, the name of the relative who attended Rush or who is on faculty at Rush, and any additional information about the relative that you provide on this form.

6) If there are any questions please speak with the Office of the Registrar before submitting this form.

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Ordered: Received:	Reordered: Why: Received:	

☐ Diploma received at Commencement/Convocation

☐ Diploma mailed:

☐ Pick up Student's Signature: _____ Date:_____

8/11