

PEPPERDINE UNIVERSITY

GEORGE L. GRAZIADIO SCHOOL OF BUSINESS AND MANAGEMENT

INTENT TO GRADUATE

If you have a change of name during your career at Pepperdine and need to update your student records to reflect your current name, please submit copies of legal documentation such as a court decree/order, marriage license/certificate or other supporting documentation with your intent to graduate form.

Please type or print clearly

NAME --AS YOU WISH IT TO APPEAR ON YOUR DIPLOMA (FIRST, MIDDLE, LAST)		
STUDENT ID NUMBER	DATE OF BIRTH	SEX <input type="radio"/> M <input type="radio"/> F

SEMESTER YOU EXPECT TO GRADUATE: <input type="radio"/> Fall (December) <input type="radio"/> Spring (April) <input type="radio"/> Summer (August) Year: _____		
DEGREE YOU EXPECT TO RECEIVE: <input type="radio"/> B.S. Mgmt <input type="radio"/> JD/MBA <input type="radio"/> MBA/MBAJ/MBFE (Fully Employed) <input type="radio"/> EMBA <input type="radio"/> MBA/MPP <input type="radio"/> PKE/MBA <input type="radio"/> MBA-Malibu <input type="radio"/> MSOD <input type="radio"/> IMBA Emphasis _____		

ADDRESS FOR MAILING DIPLOMA

NUMBER/STREET		APARTMENT OR C/O
CITY	STATE	ZIP CODE
COUNTRY (other than USA)	TELEPHONE NUMBER	

Do you plan to attend the graduation ceremony? Yes No
Have you previously applied for graduation? Yes No If yes, when? _____

SIGNATURE X _____ DATE _____

FOR OFFICE USE ONLY	
REGISTRAR'S OFFICE	DATE