

INTENT TO GRADUATE

If there was a change of name during your career at Pepperdine, please submit the name change request form located at http://www.pepperdine.edu/registrar/content/studentnamechange.pdf and copies of legal documentation (e.g., court decree/order, marriage license/certificate) with your intent to graduate form.

LEGAL NAME AS YOU WISH IT TO APPEAR ON YOUR DIPLOMA (FIRST, MIDDLE, LAST)

Please type or print clearly

STUDENT ID NUMBER	DATE OF BIRT	H SEX	F	М	
TERM YOU EXPECT TO GRADUATE: Fall (December)	Spring (April)	Summer (A	ugust)	Year:	
DECREE VOIL EVRECT TO RECEIVE.					
DEGREE YOU EXPECT TO RECEIVE: FULLY EMPLOYED PROGRAMS		FIIII_TIME D	ROGRAN	15	
Bachelor of Science		FULL-TIME PROGRAMS Master of Business Administration			
BSM	MBA (12, 15, or 20 Month)				
Master of Business Administration	IMBA (12, 13, 01 20 Month)				
PKE	JD/MBA				
EMBA	MBA/MPP				
FEMBA/ MBAJ	BS/MBA				
Online MBA	BS/IMBA				
Master of Science	Master of Science				
MSEN	MSAF				
MSML		MSGB			
MSOD		MSA			
Concentration (if applicable) :					
Number/Street	State	Zip Code	Apartn	nent or C/O	
Permanent Address Number/Street			Apartn	nent or C/O	
City	State	Zip Code	Countr	У	
Mobile Phone :					
Home Email Address:					
Do you plan to attend the graduation ceremony?	No	Yes			
Have you previously applied for graduation?	No	Yes	If yes,	when?	
, , , , , ,			•		
SIGNATURE X			DATE		
FOR OFFICE USE ONLY					
REGISTRAR'S OFFICE			DATE:		