

FRAMINGHAM STATE COLLEGE
OFFICE OF THE REGISTRAR
Dwight Hall, Room 220
100 State Street
PO Box 9101
Framingham, MA 01701-9101
508.626.4545

NOTICE OF CANDIDACY FOR GRADUATION

BACCALAUREATE DEGREE

PRINT your name **EXACTLY** as it appears on your College Records (*Legal Name Only – this is the name that will appear on your diploma*):

First Name	Middle Name or Initial	Last Name	Daytime Phone Number
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FSC ID#: _____
If unknown then need to provide SSN:

Framingham State College has four graduation dates. The following is the application deadline for these dates:

September 1st for December graduation
October 1st for January graduation
February 1st for May graduation
May 1st for August graduation

Please check one:
(based on where the majority of your undergraduate coursework was completed)
 Day Division Student
 Continuing Ed. Division Student

Indicate Major Concentration Code(s): Major1 _____ Major2 _____

Indicate Minor Code(s): Minor1 _____ Minor2 _____ Minor3 _____

Proposed date of graduation (degree requirements completed):

December
 January **Year:** _____
 May
 August

Degree to be attained (Check one):

Bachelor of Arts (B.A.)
 Bachelor of Science (B.S.)

Please check one:

I DO plan to attend the May Commencement (Graduation) Ceremony (must attend mandatory rehearsal).
 I DO NOT plan to attend the May Commencement Ceremony.

Are you planning to take courses in Continuing Education, **OR** at another institution*, to complete your degree requirements?

No
 Yes If yes, please indicate where? _____

The number of courses: _____

When? _____ *NOTE: You must file a completed Course Approval Form for each course taken at another institution **prior** to the start of the course.

PLEASE NOTE: Information releases made available to the press which list the hometown of graduates is generated from the **HOME** (permanent) address on file in the Office of the Registrar at the time of graduation.

The information that I have provided on this form is true to the best of my knowledge. I understand that if I change plans and will not graduate as specified on this form, I will notify the Office of the Registrar in writing as soon as possible. I also understand that I must re-submit by the posted deadline for a later graduation date in order to obtain a degree if this notice becomes void.

Student's Signature: _____ **Date:** _____

OFFICE USE ONLY: Date Processed on database: _____ Initials: _____
Senior Audit Log Updated: _____ Initials: _____