

**METROPOLITAN COLLEGE
MASTER of CITY PLANNING
MASTER of URBAN AFFAIRS
GRADUATION APPLICATION**

Personal information:

Do you plan to attend the May 22, 2005 ceremony? Yes No

(Only those who have one or two courses remaining in the summer may participate in the ceremony. Diplomas are awarded only after all academic requirements have been met.)

Name (exactly as you want it to be read and to appear on your diploma):

Degree:

Master of City Planning

Master of Urban Affairs

BUID Number:

Preferred Email Address:

Anticipated Graduation:

January

May

September

Year: _____

Preferred address & phone number for correspondence:

Please make sure that this address is current. You may update it on the [StudentLink](#) or by contacting the Registrar's office.

Do you authorize Metropolitan College to release your name, address, and degree information to the photographer who will take your picture as you receive your diploma? Yes No

(Departments: please send any "no" responses to Coordinator)

If you have any questions about this form, please email Paulette Lomba, at plomba@bu.edu (617-353-3025 phone).

Office use only:

Received: _____ Status: _____ Entered: _____

Other: _____

Notes:

Please send this form (or a copy) to:
Paulette Lomba
Department of Applied Social Sciences
(Criminal Justice, Urban Affairs, City Planning)
Metropolitan College
808 Commonwealth Avenue
Boston, MA 02215
617-358-3595 fax