APPLICATION FOR GRADUATION
Sargent College of Health and Rehabilitation Sciences

Complete the application and return it to the Academic Services Center in room 207. The ASC will designate you as a degree candidate with the BU Registrar and you will then be asked to update your graduation information via the BU StudentLink. If you have restricted the release of information about your degrees, honors, etc. (Link-Personal profile), your degree information cannot be made public and your name will not appear in the commencement programs.

_____

First name Middle name or initial Last name

Please provide your BU ID# _____ and email address _____

When is your projected date of graduation? May_____ (year) Sept._____ (year) Jan. _____ (year)

Will you be attending the May Sargent College convocation ceremony? Y___ N____

Which degree will you be receiving? Please check one.

Physical Therapy/Athletic Training: B.S. in Athletic Training _____ B.S. Health Studies (PT) _____

DPT (on campus) _____ tDPT (online) _____ Sc.D. _____

Health Sciences: B.S. in Human Physiology _____ B.S. Nutrition _____ B.S. Health Sci. _____

M.S. in Nutrition _____ M.S. _____ or Ph.D. _____ in Applied Anatomy and Physiology

Occupational Therapy: B.S. in Therapeutic Studies _____

M.S.O.T. (on campus) _____ M.S. (online) _____ Sc.D._____ OTD (online) _____

Speech, Language, and Hearing Sciences: B.S. _____ M.S. _____ Ph.D. _____

UNDERGRADUATE DEGREE CANDIDATES:

Did you complete a minor? If so, please include the name of the program _____

ALL GRADUATE PROGRAM DEGREE CANDIDATES (M.S., MSOT, DPT, ScD, PhD:

Please list the degrees that you've previously received (for example, B.A., B.S. etc.) _____

Sc.D. and Ph.D. DEGREE CANDIDATES:

Doctoral students must consult with their advisors as to their eligibility to participate in commencement.

Who is your dissertation advisor _____and when is/was your dissertation defense? _____

Please provide your dissertation title:

EVERYONE:
Please sign this form and be advised that it is your responsibility to notify Sargent College of any changes to the above information. Check the Boston University and Sargent College websites for updated news about graduation. Thank you very much for your assistance and congratulations!

Your signature _____ Date:_____