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Student ID Number

**The University of Montana**

**Application for Graduation – Master of Public Health (MPH)**

Complete this application and submit to the School of Public and Community Health Sciences (SPCHS) Departments Office/Program Coordinator at least one semester before the date your degree is to be awarded. Please enclose a check or money order (payable to UM) for the $45 filing fee. The Application for Graduation will be audited and reviewed by the department chair and the SPCHS office.

Name: \_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Degree Award Date: \_\_\_\_     \_\_\_\_\_\_\_

 Print as it should appear on diploma Expected semester & Year

Diploma Mailing Address: \_\_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Address should be valid 3 to 4 months after graduation date.)

City: \_\_\_\_     \_\_\_\_\_\_\_\_\_\_\_ State: \_     \_\_ Zip: \_     \_\_\_

Phone: (     )\_

Degree applying for: Master of Public Health

Degree Requirements:

[ ]  Practicum (N/A for 2006/07 catalog graduates; required for all others)

[ ]  Professional Paper (or Professional Portfolio for 2006/07 catalog graduates; required for all others)

[ ]  Capstone: Professional Portfolio (or Professional Paper for 2006/07 catalog graduates; required for all others)

[ ]  Defense of Capstone

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| PreviousDegrees Received |  | Institution |  | Date(MM/YYYY) |  | Major Field |
|       |  |       |  |       |  |       |
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Application for Graduation Audited and on track:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department Chair / Vice-Chair and SPCHS Office Signatures Date Audited

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Application for Graduation Approved:

Degree Requirements Satisfied: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Department Chair Signature Date completed

Banner Input \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Final GPA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Continuous Registration \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_