

# North Park Theological Seminary

## Application for Graduation

Fill out and return to SEMINARY ACADEMIC SERVICES

Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_ Date: \_\_\_\_\_

I am applying for graduation in: May \_\_\_\_\_ December \_\_\_\_\_ (please indicate the year)

My field education requirements: have been completed \_\_, will be completed \_\_.

Give dates of completion or expected completion (where applicable):

CPE \_\_\_/\_\_\_/\_\_\_, Internship(s) \_\_\_/\_\_\_/\_\_\_, TRM \_\_\_/\_\_\_/\_\_\_  
mm/dd / yy mm/dd / yy mm/dd / yy

Field Education Office Signature: \_\_\_\_\_

My degree program is:

___ Master of Divinity	___ Master Certificate in:
___ Master of Arts in Christian Formation*	_____
___ Master of Arts in Theological Studies*	___ Doctor of Ministry
___ Master of Arts in Christian Ministry*	

\*Please indicate your specialized ministry track, concentration area, or thesis if applicable.

1. \_\_\_\_\_ 2. \_\_\_\_\_

I wish to apply for a dual degree:

___ Master of Management in Nonprofit Administration	___ Master of Management
___ Master of Business Administration	___ SBNM Certificate

My name should appear on my diploma as follows (please print):

\_\_\_\_\_  
(First) (Last) (Middle)  
Address to which my diploma should be sent: \_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City, State, Zip)

My home church should appear on the program as follows (include city & state):

\_\_\_\_\_

### Prior Academic Record

Name, city, state of each institution where you completed prior studies

1. \_\_\_\_\_ 2. \_\_\_\_\_  
\_\_\_\_\_

Degree \_\_\_\_\_ Year \_\_\_\_\_ Degree \_\_\_\_\_ Year \_\_\_\_\_

I hereby apply for graduation and agree that all requirements for graduation must be completed prior to the issuance of the degree. All academic credit must be completed and all field education must either be completed, or satisfactorily arranged for, by the graduation date.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)