

# Valparaiso University

## FORMAL APPLICATION FOR A DEGREE

ID # \_\_\_\_\_

Date \_\_\_\_\_

**PRINT FULL NAME AS IT SHOULD APPEAR ON YOUR DIPLOMA**

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Last Name \_\_\_\_\_

Valparaiso Address \_\_\_\_\_ Phone \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_

\_\_\_\_\_ E-mail Address \_\_\_\_\_

Expected Date of Graduation: May \_\_\_\_\_ August \_\_\_\_\_ December \_\_\_\_\_

Adviser's Name \_\_\_\_\_ Indicate year of University catalog which lists the graduation requirements that you expect to fulfill (any year of residence): \_\_\_\_\_

CHECK ONE DEGREE:

\_\_\_\_\_ **ASSOCIATE OF ARTS.** Concentration: Check one of the following:  
\_\_\_\_\_ Culture & Humanity \_\_\_\_\_ Social & Behavioral Science \_\_\_\_\_ Communication & Expressive Arts

\_\_\_\_\_ **ASSOCIATE IN SCIENCE.** No major required.

\_\_\_\_\_ **BACHELOR OF SCIENCE IN EDUCATION.** Indicate major: \_\_\_\_\_ Elementary Education  
\_\_\_\_\_ Middle Level Education

Second major if applicable: \_\_\_\_\_

Minor(s) if applicable: \_\_\_\_\_

\_\_\_\_\_ **BACHELOR OF SCIENCE IN FINE ARTS.** Major: Art

Second major if applicable: \_\_\_\_\_

Minor(s) if applicable: \_\_\_\_\_

\_\_\_\_\_ **BACHELOR OF LIBERAL AND PROFESSIONAL STUDIES.** Concentration: Check one of the following:  
\_\_\_\_\_ Culture & Humanity \_\_\_\_\_ Social & Behavioral Science \_\_\_\_\_ Communication & Expressive Arts

\_\_\_\_\_ **BACHELOR OF MUSIC.** Major: Check one of the following:  
\_\_\_\_\_ Church Music \_\_\_\_\_ Composition \_\_\_\_\_ Performance

Minor(s) if applicable: \_\_\_\_\_

\_\_\_\_\_ **BACHELOR OF MUSIC EDUCATION.** Major: Music Education

Check one of the following concentrations:

\_\_\_\_\_ Vocal \_\_\_\_\_ Instrumental \_\_\_\_\_ Combination

Minor(s) if applicable: \_\_\_\_\_

\_\_\_\_\_ **BACHELOR OF SCIENCE IN PHYSICAL EDUCATION.** Major: Check one:  
\_\_\_\_\_ Physical Education \_\_\_\_\_ PE: Athletic Training \_\_\_\_\_ PE: Sports Management \_\_\_\_\_ PE: Exercise Science

Second major if applicable: \_\_\_\_\_

Minor(s) if applicable: \_\_\_\_\_

\_\_\_\_\_ **BACHELOR OF SOCIAL WORK.** Major: Social Work

Second major if applicable: \_\_\_\_\_

Minor(s) if applicable: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**RETURN COMPLETED FORM TO REGISTRAR'S OFFICE**

DEADLINE: October 1 for May, August graduation; April 1 for December graduation.

Dean's Signature required for LATE application: \_\_\_\_\_ Date \_\_\_\_\_