



APPLICATION FOR GRADUATION

I. TO BE FILLED OUT BY THE CANDIDATE:

NAME _____
(Please print your name EXACTLY as you wish it to appear on diploma, including religious initials where appropriate.)

NAME: _____
(Please print the phonetic pronunciation of your name with accented syllable underlined.)

Table with 3 columns: DEGREE(S) TO BE RECEIVED, CERTIFICATE(S) TO BE RECEIVED, EXPECTED DATE OF GRADUATION. Rows include Master of Divinity, Master of Divinity and Master of Arts in Theology, Biblical Studies, Thomistic Studies, December, May, August.

I do [] do not [] plan to attend the May commencement events.

Signature of Candidate: _____ Date _____
(must be a handwritten signature - electronic signatures will not be accepted)

Daytime phone: _____ Email address: _____

II. TO BE FILLED OUT BY ACADEMIC ADVISOR: Requirements fulfilled

Master of Divinity

- Admission to Candidacy
4 hrs. Integrative Studies
3 hrs. Philosophy
12 hrs. Biblical Studies
15 hrs. Systematic Theology
12 hrs. Pastoral Theology
6 hrs. Lay Spiritual Formation
11 hrs. Liturgical Theology
4 hrs. Preaching
6 hrs. Historical Studies
9 hrs. Moral Theology
13 hrs. Prof. Min. Form

M.Div/MA Additional Requirements

18 hrs. additional hours
Pastoral Theology or Ministerial Formation do not fulfill requirements

Certificate in Biblical Studies

15 hrs. Biblical Studies

Certificate in Thomistic Studies

9 hrs. Introductory Cycle
9 hrs. Thomistic Seminars

This student has completed the academic requirements necessary for graduation.
This student has completed the requirements of the ratio particularis of their order/province.

Additional Comments:
(course substitutions or waivers/ advanced standing)

Signature of Academic Adviser: _____ Date: _____

Approval by Academic Dean: _____ Date: _____

Approval by Registrar: _____ Date: _____

Approval by Business Manager: _____ Date: _____