**GEORGE MASON UNIVERSITY**

# Retroactive Graduation Application

**Required after the 6 week graduation grace period has elapsed.**

*The Late Graduation Application can be used for the current term if the
online application deadline has passed and the 6 week graduation grace period has not elapsed.*

- A current degree evaluation showing completion of degree requirements must be attached.
- Diplomas from past semesters will contain the signatures of the current University President, Rector of the Board of Visitors, Provost, and University Registrar.

Eligibility:

- All requirements (courses, test and papers) were met and documented in the Registrar's Office at the time of requested graduation date.
- No additions/changes have been made to the records since that time.

Name: _____ Mason Student ID# _____
       Last                              First

Daytime Phone: _____ Email: _____

Diploma Mailing Address (***Required***):

Street: _____ Apt #: _____ City, State: _____

Zip: _____ Country (if not USA): _____

Graduation Term Requested**:** _____
                               Semester                    Year

Reason for Request: _____

_____

Degree program as of your requested Graduation Term:

Note: New degree components, changed or declared, require a graduation date after that change.

Degree: _____ Major/Program: _____

Secondary Components:

2nd Major: _____ Concentration: _____
Minor: _____ 2nd Minor: _____
Certificate: _____

**Student's Signature**: _____

**Department Approval:** ☐ Major Requirements met per attached degree audit    ☐ Denied, major requirements not met per attached degree audit

_____          _____
Department Chair Name and Signature                   Date

_____          _____
Dean Name and Signature                               Date

_____          _____
Minor Department Signature  (if applicable)           Date

_____          _____
Provost Signature (if applicable)                     Date

**After approval signatures have been obtained, return this form to the Office of the University Registrar, Student Union Bldg 1, Room 2101 MS 3D1, Fax (703) 993-4668.**

## Final University Approval – Office of the University Registrar

☐ Approved - Graduation Term: _____    ☐ Denied - Reason: _____

Registrar's Initials: _____/_____                                    7/13