



INTENT TO GRADUATE

Deadline to Submit: June 1 (August graduation); August 1 (October graduation); October 1 (January graduation); February 1 (May graduation)

Instructions:

1. **Complete and save this form as a PDF**
2. **Submit the form via e-mail attachment to the Graduate College at gradcoll@uvm.edu WITH A CC: TO YOUR ADVISOR AND YOUR DEPARTMENT CONTACT**
3. **Advanced Degree Fees will be charged to your student account upon receipt at the following rates:**
Certificate-\$10; Master's - \$20; Doctoral - \$35

NAME IN THE UVM SYSTEM- FIRST NAME: _____

LAST NAME: _____

NAME **AS YOU WANT IT TO APPEAR ON YOUR DIPLOMA** and in the Commencement Program:

Please write your name pronunciation for the Ceremony: _____

UVM STUDENT ID NUMBER: _____

PERMANENT ADDRESS: _____
Street Address City State Zip Code

Your diploma will be mailed if you do not attend the ceremony; please update your address with the Registrar's Office as well.

UVM Email Address **Non-UVM Email Address**

DEGREE: (Select one) _____ **WRITING A:** (Select one) _____ **YEAR:** _____

Dissertation Thesis Non-Thesis

May October
August January

PROGRAM _____ **GRADUATION TERM:** _____ **YEAR:** _____

DATE COMPREHENSIVE EXAMS WERE COMPLETED: _____

PREVIOUS DEGREES EARNED (Ex: BA, MEd, AS, etc.):

_____	_____	_____
Degree	College or University Name	Year
_____	_____	_____
Degree	College or University Name	Year

HOMETOWN (City and State/City and Country): _____ (for Commencement Program)

GPA: _____ **Advisor Name:** _____
Program Coordinator/Director Name: _____

I acknowledge that upon receipt of this form, an Advanced Degree Fee will be charged to my UVM account