# Western Oregon University – *Application for Completion of a Master's Degree*

**This form should be filed with the Graduate Office (Admin. 107) during the term prior to the term in which the student plans to graduate. APPLICATION FEE $25.**

**(Please print on Light Green paper.)**

**Print your name:** _____
**PRINT YOUR FULL NAME AS YOU WISH IT TO APPEAR ON YOUR DIPLOMA**

**V#** _____ **E-mail address** _____

**Local Address:** _____ **Permanent Address:** _____

**City:** _____ **State:** _____ **Zip:** _____ **City:** _____ **State:** _____ **Zip:** _____

**Primary phone: (  ) _____-_____** **Secondary phone: (  ) _____-_____**

**___cell ___ home ___work** **___cell ___ home ___work**

**Diploma Mailing Address:**_____

**Degrees are conferred once each year at the June Commencement.** All official transcripts for transfer courses must be on file in the Graduate Office and all requirements for the degree must be completed before a student is allowed to participate in the commencement program. A diploma will not be awarded until all master's degree requirements are completed.

**Final comprehensive examinations are administered Fall, Winter and Spring terms. They are not offered during summer.** The earliest a student is eligible to take their final written comprehensive examination is during their last term of study.

☐ I request consideration for the Written Comprehensive Examinations _____
Term/Year

I prefer to complete the exams in: ☐ One day ☐ Two days

☐ I will need special accommodations. I have contacted WOU's Office of Disability Services to make arrangements.

**Alternative evaluation procedures** must be satisfactorily completed and reported to the Graduate Office at least three (3) weeks before the end of the term in which the applicant plans to graduate.

☐ I request consideration for completion of Alternative Evaluation Procedures _____
Term/Year

☐ Thesis ☐ Field Study ☐ Professional Project ☐ Portfolio ☐ Advanced Proficiency

Check master's degree and area being completed:

**Master of Science in Education:**
☐ Standard License
☐ Continuing License
☐ Information Technology
☐ Non-licensure

☐ **MS: Rehabilitation Counseling**

**Master of Science in Education: Special Education**
☐ Special Educator
☐ Teacher Prep.: Deaf Ed.
☐ Non-licensure

**Master of Arts in Teaching:**
☐ Non-licensure
☐ High School Authorization

☐ **MA Criminal Justice**

☐ **MA History**

☐ **MM Contemporary Music**

☐ **MS Management & Info. Systems**

List all courses by number and title and credit hours in which you will be enrolled during the term you plan to complete your degree. Also list all courses in which you have not cleared an incomplete grade.

_____ _____ _____

_____ _____ _____

_____ _____
Your signature Date

Rev. July 2010