

PLEASE NOTE: GRADUATION FEE FOR DEGREE RECIPIENTS IS \$125. STUDENTS WHO MISS THE APPLICATION DEADLINE WILL BE MOVED TO THE NEXT AVAILABLE DEGREE DATE. THIS DOES NOT MAKE YOU INELIGIBLE FROM PARTICIPATING IN COMMENCEMENT. THERE ARE NO EXCEPTIONS.

Associate Degree **Bachelor's Degree**

Please check the degree and date for which you are applying:

<i>Degree Date</i>	<i>Application Deadline</i>	<i>Commencement Eligibility (degree recipients only)</i>
<input type="checkbox"/> May 19, 2012	October 17, 2011	May 19, 2012
<input type="checkbox"/> August 31, 2012	January 16, 2011	May 19, 2012
<input type="checkbox"/> December 31, 2012	March 15, 2012	May 2013

Master's Degree **Doctoral Degree**

Please check the degree and date for which you are applying:

<i>Degree Date</i>	<i>Application Deadline</i>	<i>Commencement Eligibility (degree recipients only)</i>
<input type="checkbox"/> March 31, 2012 (quarter programs only)	October 17, 2011	May 19, 2012
<input type="checkbox"/> May 19, 2012	October 17, 2011	May 19, 2012
<input type="checkbox"/> August 31, 2012	January 16, 2011	May 19, 2012
<input type="checkbox"/> December 31, 2012	March 15, 2012	May 2013

PRINT YOUR NAME, ID NUMBER AND PERMANENT MAILING ADDRESS (where diploma is to be mailed):

First	Middle	Last	Student ID	
Address	City	State	Zip	Country
Home Phone Number		Cell Phone Number		
Student signature (required)			Date of Submission	

ASSOCIATE, MASTER'S OR DOCTORAL APPLICANTS

Degree program	Concentration (if any)
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BACHELOR'S APPLICANTS

Primary major	Secondary major (if any)	Minor (if any)
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Do you plan to attend the commencement convocation (*degree recipients only*): **Yes** **No**

RETURN FORM AND PAYMENT TO:
Benedictine University at Springfield
Student Accounts
1500 N. Fifth Street
Springfield, IL 62702
Fax: (217) 525-1497 • Phone: (217) 525-1420

Method of Payment: Cash Check Visa MasterCard Discover

Card number: _____-_____-_____-_____ Expiration Date mm/yy: ____/____ CVV/CVC _____

Print Name: _____ Signature: _____