

FACULTY OF THEOLOGY

INTENT TO GRADUATE

FIRST NAME: _____

LAST NAME: _____

ADDRESS: _____

Degree Sought: MA MDiv STM MMFT BTh

1) When do you intend to graduate? Spring 20____ Fall 20____

2) Are you currently taking a course(s) to complete your degree work? Yes No
(If No, give date of last registration): _____

3) Are you doing your course work through the Faculty of Theology? Yes No
(If No, give name of other institution): _____

Date application submitted: _____ Student's signature: _____