



# APPLICATION FOR ADMISSION TO THE GRADUATING CLASS College of Graduate Studies

Graduate (MAEd) non-refundable application fee: \$70.00

Please print.

NAME: \_\_\_\_\_ STUDENT NO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

(The email address that you provide will be the method in which you receive updates and announcements regarding graduation)

NAME AS YOU WISH IT  
TO APPEAR ON DIPLOMA: \_\_\_\_\_

DO YOU PLAN TO PARTICIPATE IN THE GRADUATION CEREMONY?  YES  NO

SELECT THE CEREMONY IN WHICH YOU WISH TO BE INCLUDED:  DECEMBER  MAY  AUGUST

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Please **MAIL, FAX, OR EMAIL** your form after completion of your requirements.

BETHEL UNIVERSITY  
Attn. Randy Callahan, Certification Officer  
325 Cherry Avenue  
DFAB 106  
McKenzie, TN 38201  
Phone: 731-352-6720  
Fax: 731-241-0022  
callahanr@bethelu.edu

Note: It is the responsibility of the student to confirm, within two weeks of submission, that this application has been received by the Certification Officer.

FOR OFFICE USE:  SENT TO AUDIT  BILLING