

## STATEMENT OF INTENTION TO GRADUATE

**Please return this form to the Registrar's Office.**

1) Candidate in: December \_\_\_\_\_ / May \_\_\_\_\_ (please mark one)

Degree:

\_\_\_\_\_ M.A. in \_\_\_\_\_

\_\_\_\_\_ M.Div.

\_\_\_\_\_ S.T.M.

\_\_\_\_\_ D.Min.

\_\_\_\_\_ Certificate Theological Studies (Special Students)

\_\_\_\_\_ Certificate of Advanced Theological Studies (for DMin students)

\_\_\_\_\_ Certificate in Congregational Health Ministries and Parish Nursing

2) Name as it appears on degree/certificate:

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*First Name*

*Middle Names (s)*

*Last Name*

*Suffix*

**NOTE:** Print full legal name as it will appear on all official documents as of the date of graduation. "Jr.", "II", "III", initials of a religious order, etc., will appear as a suffix on the degree if you indicate them on this form. Titles (Rev., Dr., Mr., Sr., Fr.) are not used.

3) I currently hold the following degree(s) — please list them all (**for degree candidates**):

<i>Degree</i>	<i>School</i>	<i>Year Granted</i>

4) Please check as applicable:

\_\_\_\_\_ Degree/Certificate to be presented to me in person at May Commencement.

\_\_\_\_\_ I will be graduated in absentia and the degree/certificate should be mailed to me at:

(Street and No.) \_\_\_\_\_

(City, State, Zip) \_\_\_\_\_

Degrees and hoods for students graduating in absentia will be mailed in June upon receipt of **\$15** accompanying this application. Make check payable to A.N.T.S.

Any student who wishes to be graduated in absentia should notify the school **IN WRITING** as stated in the Academic Regulations in the Catalog.

5) M.A., S.T.M., D.Min and Certificates. candidates **ONLY:** My advisor is \_\_\_\_\_

Date \_\_\_\_\_ Student Signature \_\_\_\_\_