

Dear Law Student:

You have obtained this application for graduation because you are assuming that you have enough hours to be a prospective graduate and will finish your requirements during this academic year.

I. COMMENCEMENT

The Commencement ceremony will be held in May. If you finish your requirements Fall, Spring or Summer Semester, you are eligible to participate in the May Commencement ceremony. Diplomas are mailed approximately two (2) months after the end of each semester provided you are in good standing at the University.

II. GUIDELINES FOR FILING YOUR APPLICATION

| <u>If You Are Finishing:</u> | <u>The Recommended deadline is:</u> |
|-------------------------------------|--|
| Fall Semester | July 1 st |
| Spring Semester | November 1 st |
| Summer Semester | January 15 th |

The graduation fee is **\$40.00**. It must be in the form of a check or money order made payable to Cleveland State University. Please submit your payment and **COMPLETED** application form to **The Cleveland-Marshall Records Office, LB 142**.

If you are mailing your completed application and fee of \$40.00 please mail to Cleveland State University, Cleveland-Marshall College of Law, Records Office, 1801 Euclid Avenue, Room LB142, Cleveland Ohio 44115.

III. PROCESSING YOUR APPLICATION

As soon as your completed application form and fee have been received in the Records Office, we will process it and forward it to the University's Graduation Office to have your diploma ordered.

When checking the status of your application or if you have questions regarding you application for graduation please call the Cleveland-Marshall Student Records Office at 216-687-2289.

Thank you
Records Department

Personal Information

Name: _____ CSU ID: _____

Note: the name displayed on your diploma will be the official name recorded in the University's student database

Street Address: _____ Phone (Home): _____

City: _____ State: _____ Zip: _____ Phone (Cell/Other): _____

Email: _____

Degree Information (check one only)

Juris of Doctor

Master of Legal Studies

Master of Laws *Title of Dissertation:* _____

Graduating Semester and Year (check box and enter year)

Fall 20 _____

Spring 20 _____

Summer 20 _____

Signature: _____ **Date:** _____

Office Use Only

| | | |
|---------------------------------------|------------------------------|------------------------------------|
| Residency: _____ | _____ Legal Profession | _____ ULWR |
| GPA: _____ | _____ Contracts | <i>Title:</i> _____ |
| Hours Completed: _____ | _____ Torts | _____ Ad Law/Comp |
| Hours in Progress: _____ | _____ Civil Procedure | <i>Title:</i> _____ |
| Total Hours Required: _____ | _____ Criminal Law | _____ Evidence |
| Requirements will be completed: _____ | _____ Property | _____ Third Semester Legal Writing |
| | _____ Legal Research/Writing | <i>Title:</i> _____ |
| | _____ Constitutional Law | _____ Perspective |
| | | <i>Title:</i> _____ |

Registrar's Approval

Date

Distribute copies to: Law Records Office (original)
University Registrar
Student