

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**

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

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