UNIVERSITY OF MASSACHUSETTS BOSTON

OFFICE OF THE REGISTRAR

Students who are currently matriculated in a University of Massachusetts Boston graduate degree program, or who have completed a University of Massachusetts Boston graduate degree or certificate must complete this form. All other applicants must complete the graduate admissions application.

This form must be submitted to the Office of Registrar with the required signatures one month prior to the beginning of classes for the semester indicated below.

APPLICATION FOR (enter program)

- ❒ PhD _____
- ❒ C.A.G.S. _____
- ❒ Certificate _____
- ❒ Other _____

Semester to Enroll _____
sem./yr.

Social Security Number _____

Name _____
last first M.I. previous

Address _____
street

_____
city state zip code phone number

Check here if this address is different from when you last attended ❒

Most recent U/Mass Boston degree received and date _____

Indicate program if currently enrolled and expected date of completion

_____

Student Signature _____

Graduate Program Director Approval Signature _____

Registrar's Office Signature/Date _____/_____